Case 19-42048 Doc 1 Filed 07/08/19 Entered 07/08/19 15:15:07 Desc Main Document Page 1 of 118

Fill in this information to identify your case:	
United States Bankruptcy Court for the:	
District of Minnesota	
Case number (# known):	Chapter you are filing under:
	Chapter 7 Chapter 11
	Chapter 12
	☐ Chapter 13

PECEIVED

19 JUL -8 PM 2:57

U.S. BANKRUPTCY COURTS an amended filling

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

12/17

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a joint case—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses Debtor 1 and Debtor 2 to distinguish between them. In joint cases, one of the spouses must report information as Debtor 1 and the other as Debtor 2. The same person must be Debtor 1 in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Pa	art 1: Identify Yourself		
		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
1.	Your full name		
	Write the name that is on your government-issued picture identification (for example, your driver's license or passport). Bring your picture identification to your meeting with the trustee.	Brandon First name Allen Middle name Blasidell Last name Suffix (Sr., Jr., II, III)	Tonya First name Draughon Middle name Blasidell Last name Suffix (Sr., Jr., II, III)
2.	All other names you have used in the last 8 years	First name	Tonya First name Nicole
	Include your married or maiden names.	Middle name	Middle name Taylor
		Last name	Last name
			Tonya
		First name	First name Draughon
		Middle name	Middle name
			Taylor
		Last name	Last name
3.	Only the last 4 digits of your Social Security number or federal Individual Taxpayer Identification number (ITIN)	xxx - xx - 6 3 7 3 OR 9 xx - xx -	$\begin{array}{cccccccccccccccccccccccccccccccccccc$

Case 19-42048 Doc 1 Filed 07/08/19 Entered 07/08/19 15:15:07 Desc Main Document Page 2 of 118

Debtor 1	Brandon Alle			Case number (if known)	
		a Bandentini de emples (Angles	s auther, sugaran kan kurrayse grand Welsy's efektilik kalangen de pinga unug Gulddininin (dansk als		erren persona kunga seriat saja mangkan sajaman kan mangkan di mananan kunan mangkan mangkan kan sa kan sa kan
		About Debtor 1:		About Debtor 2 (Spouse C	Only in a Joint Case):
and Ider	business names Employer ntification Numbers I) you have used in	☐ I have not used any bus	siness names or EINs.	☐ I have not used any bus	iness names or EINs.
the	last 8 years	Business name		Business name	
	ide trade names and g business as names	Business name		Business name	
		<u> </u>		EIN	
		EIN		EIN	
5. Wh	ere you live	gode gelektraturen agente met fortat kratistan hall stad stad fortat at stad stad stad stad stad stad sta		If Debtor 2 lives at a diffe	rent address:
		931 Shady Ridge I	Lane	931 Shady Ridge L	ane
		Number Street		Number Street	
		Braham	MN 55006	Braham	MN 55006
		City	State ZIP Code		State ZIP Code
		Isanti		Isanti	
		County		County	
		If your mailing address is above, fill it in here. Note any notices to you at this r	that the court will send	If Debtor 2's mailing add yours, fill it in here. Note any notices to this mailing	that the court will send
		Number Street		Number Street	
		P.O. Box		P.O. Box	
		City	State ZIP Code	City	State ZIP Code
6, WI	ny you are choosing	Check one:	na menona. Na hati sebenjingi pangan eng kahiji Bilah di Bilah endi Alemanya ang mangangan mengadan	Check one:	over for the time to the transfer of the time of time of the time of time of the time of t
thi	s district to file for nkruptcy	Over the last 180 days I have lived in this dist other district.	s before filing this petition, rict longer than in any	Over the last 180 days I have lived in this district.	rict longer than in any
		I have another reason (See 28 U.S.C. § 1408	. Explain. 8.)	☐ I have another reason. (See 28 U.S.C. § 1408	
AND THE REAL PROPERTY OF THE PERSON OF THE P					

Case 19-42048 Doc 1 Filed 07/08/19 Entered 07/08/19 15:15:07 Desc Main Document Page 3 of 118

Part 2:	Tell the Court About	Your Ban	ikruptcy Case						
. The ch	apter of the iptcy Code you	Check one. (For a brief description of each, see Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)). Also, go to the top of page 1 and check the appropriate box.							
are cho	osing to file	☑ Chapter 7							
under		☐ Chapter 11							
		☐ Chapter 12							
		☐ Chapte	er 13						
s. How y	ou will pay the fee	local of yourse submit with a linear Application of the submit with a less than the submit and t	court for more deta elf, you may pay vitting your paymer pre-printed address d to pay the fee in cation for Individual uest that my fee I w, a judge may, b the fee in installment	ails about how you may with cash, cashier's ch nt on your behalf, your ess. n installments. If you als to Pay The Filing F be waived (You may to ut is not required to, we efficial property line that	choose this option in the property of the prop	ck with the clerk's office in your, if you are paying the fee order. If your attorney is ay with a credit card or check ion, sign and attach the official Form 103A). Ion only if you are filing for Chapter 7, and may do so only if your income is a family size and you are unable to ust fill out the Application to Have the with your petition.			
bankı	you filed for ruptcy within the years?	☑ No ☐ Yes.	District		MM / DD / YYYY	Case number			
			District	When	MM / DD / YYYY	Case number			
cases filed not fi vou,	iny bankruptcy s pending or being by a spouse who is iling this case with or by a business ner, or by an	☑ No ☐ Yes.	Debtor	When		_ Relationship to you Case number, if known			
affilia			Debtor	When	MM / DD / YYYY	Relationship to you Case number, if known			
11. Do y resid	ou rent your dence?	☐ No. ☐ Yes.	☑ No. Go to line ☑ Yes. Fill out li	obtained an eviction jud 12. nitial Statement About an inkruptcy petition.		u? nt Against You (Form 101A) and file it as			

Case 19-42048 Doc 1 Filed 07/08/19 Entered 07/08/19 15:15:07 Desc Main Document Page 4 of 118

or 1 Brandon Aller	n Blaisdell	Case number (if known)				
First Name Middle Name	Last Name					
Poport About Any Bi	usinesses You Own as a Sol	le Proprietor				
Report About Any Bi						
Are you a sole proprietor	No. Go to Part 4.					
of any full- or part-time ousiness?	Yes. Name and location of but	siness				
A sole proprietorship is a ousiness you operate as an						
individual, and is not a separate legal entity such as	Name of business, if any					
a corporation, partnership, or	Number Street					
LLC. If you have more than one						
sole proprietorship, use a separate sheet and attach it						
to this petition.	City	State ZIP Code				
	Check the engroprists t	box to describe your business:				
		uss (as defined in 11 U.S.C. § 101(27A))				
		Estate (as defined in 11 U.S.C. § 101(51B))				
		fined in 11 U.S.C. § 101(53A))				
	☐ Commodity Broker	(as defined in 11 U.S.C. § 101(6))				
	☐ None of the above					
Are you filing under Chapter 11 of the Bankruptcy Code and are you a small business debtor?	most recent balance sheet, state any of these documents do not on the lambda of the la					
For a definition of small business debtor, see 11 U.S.C. § 101(51D).	No. I am filing under Chapte the Bankruptcy Code.	ter 11, but I am NOT a small business debtor according to the definition in				
11 0.3.0. 8 101(015).		es. I am filing under Chapter 11 and I am a small business debtor according to the definition in the				
		The state of the s				
art 4: Report if You Own	or Have Any Hazardous Pro	perty or Any Property That Needs Immediate Attention				
4. Do you own or have any	☑ No					
property that poses or is	Yes. What is the hazard?					
alleged to pose a threat of imminent and	Tes. What is the head of					
identifiable hazard to public health or safety?						
Or do you own any						
property that needs immediate attention?	If immediate attention	n is needed, why is it needed?				
For example, do you own perishable goods, or livestock that must be fed, or a building	: !					
that needs urgent repairs?		102				
	Where is the propert	Number Street				
		City State ZIP Code				

Entered 07/08/19 15:15:07 Filed 07/08/19 Case 19-42048 Doc 1 Desc Main Page 5 of 118 Document

•						
Del	otor 1 Brandon Alle First Name Middle Nam	n <u>Blaisdell</u> e Last Name	Case	number (# known)		
Pa	ort 5: Explain Your Efforts	s to Receive a Briefii	ng About Credit Counseling			
15	Tell the court whether	About Debtor 1:		About Debtor 2 (Spous	se Only in a Joint Case):	
10.	you have received a	You must check one:		You must check one:		
briefing about credit counseling. The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file. If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.	☑ I received a briefin	g from an approved credit y within the 180 days before I cy petition, and I received a pletion.	☑ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion. Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.			
	Attach a conv of the	e certificate and the payment u developed with the agency.				
	☐ I received a briefin	ng from an approved credit y within the 180 days before I tcy petition, but I do not have a	counseling agenc filed this bankrup certificate of com	ng from an approved credit y within the 180 days before I tcy petition, but I do not have a pletion.		
	Makin 44 days after	er you file this bankruptcy petition, ppy of the certificate and payment	you MUST file a co plan, if any.	er you file this bankruptcy petition, ppy of the certificate and payment		
	can begin collection activities	services from an unable to obtain	ed for credit counseling approved agency, but was those services during the 7 my request, and exigent erit a 30-day temporary waiver	services from an unable to obtain f	ed for credit counseling approved agency, but was those services during the 7 my request, and exigent erit a 30-day temporary waiver nt.	
		To ask for a 30-da requirement, attac what efforts you need to be a second or	ny temporary waiver of the th a separate sheet explaining nade to obtain the briefing, why o obtain it before you filed for what exigent circumstances	requirement, attac what efforts you m	y temporary waiver of the the a separate sheet explaining nade to obtain the briefing, why o obtain it before you filed for what exigent circumstances this case.	
		Your case may be	e dismissed if the court is our reasons for not receiving a	dissatisfied with V	e dismissed if the court is our reasons for not receiving a u filed for bankruptcy.	
		briefing before you If the court is satistill receive a brie You must file a common agency, along with developed, if any may be dismisse	u filed for bankruptcy. sfied with your reasons, you must fing within 30 days after you file. ertificate from the approved th a copy of the payment plan you If you do not do so, your case d. the 30-day deadline is granted	If the court is satisstill receive a brie You must file a congency, along wit developed, if any may be dismissed.	sfied with your reasons, you must fing within 30 days after you file. ertificate from the approved th a copy of the payment plan you . If you do not do so, your case	
		only for cause ar days.	id is limited to a maximum of 15	days.		
		I am not require credit counseling	d to receive a briefing about ng because of:	credit counselir		
		☐ Incapacity.	I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.	☐ Incapacity.	deficiency that makes me incapable of realizing or making rational decisions about finances.	
		☐ Disability.	My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I	☐ Disability.	My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.	

page 5

duty in a military combat zone.

☐ Active duty. I am currently on active military

If you believe you are not required to receive a

briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

reasonably tried to do so.

duty in a military combat zone.

☐ Active duty. I am currently on active military

If you believe you are not required to receive a

briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

Case 19-42048 Doc 1 Filed 07/08/19 Entered 07/08/19 15:15:07 Desc Main Document Page 6 of 118

ebtor 1 Brandon Allen	Blaisdell	Case number (# known)_				
First Name Middle Name	Last Name					
art 6: Answer These Quest	ions for Reporting Purpose)S	14 H C C C 404(9)			
6. What kind of debts do	16a. Are your debts primarily consumer debts? Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."					
you have?	 No. Go to line 16b. ✓ Yes. Go to line 17. 16b. Are your debts primarily business debts? Business debts are debts that you incurred to obtain 					
	16b. Are your debts primar money for a business or in	ily business debts? Business debts are vestment or through the operation of the bu	e debts that you incurred to obtain usiness or investment.			
	□ No. Go to line 16c.□ Yes. Go to line 17.					
	16c. State the type of debts you	u owe that are not consumer debts or busin	less debts.			
7. Are you filing under Chapter 7?	☐ No. I am not filing under Cl	hapter 7. Go to line 18.	the problem of the control of the co			
Do you estimate that after any exempt property is	Yes. I am filing under Chapter 7. Do you estimate that after any exempt property is excluded and administrative expenses are paid that funds will be available to distribute to unsecured creditors?					
excluded and	☑ No					
administrative expenses are paid that funds will be available for distribution to unsecured creditors?	Yes					
18. How many creditors do		1,000-5,000	25,001-50,000 50,001-100,000			
you estimate that you owe?	☐ 50-99 ☐ 100-199 ☐ 200-999	5,001-10,000 10,001-25,000	☐ More than 100,000			
19. How much do you	2 \$0-\$50,000	\$1,000,001-\$10 million	\$500,000,001-\$1 billion \$1,000,000,001-\$10 billion			
estimate your assets to	\$50,001-\$100,000 \$100,001-\$500,000	\$10,000,001-\$50 million \$50,000,001-\$100 million	☐ \$10,000,000,001-\$50 billion			
be worth?	\$100,001-\$300,000 \$500,001-\$1 million	\$100,000,001-\$500 million	More than \$50 billion			
20. How much do you	\$0-\$50,000	☐ \$1,000,001-\$10 million	\$500,000,001-\$1 billion \$1,000,000,001-\$10 billion			
estimate your liabilities	\$50,001-\$100,000	\$10,000,001-\$50 million \$50,000,001-\$100 million	\$1,000,000,001-\$10 billion			
to be?	☑ \$100,001-\$500,000 ☐ \$500,001-\$1 million	\$50,000,001-\$100 million	☐ More than \$50 billion			
Part 7: Sign Below						
For you	aarroof	, and I declare under penalty of perjury that				
·	of title 11, United States Cod	Chapter 7, I am aware that I may proceed, e. I understand the relief available under ea				
	this document I have obtain	and I did not pay or agree to pay someone ed and read the notice required by 11 U.S.	0 - ()			
	I request relief in accordance	with the chapter of title 11, United States	Code, specified in this petition.			
		statement, concealing property, or obtainin result in fines up to \$250,000, or imprisonn 19, and 3571.	ng money or property by fraud in connection the for up to 20 years, or both.			
	* Lumber Blesse	iel x Jo	rye Blander 1			
	Signature of Debtor 1					
	Executed on 07 · 01	Fixecut	ed on 07 01 3019			

Case 19-42048 Doc 1 Filed 07/08/19 Entered 07/08/19 15:15:07 Desc Main Document Page 7 of 118

ebtor 1 Brandon Alle First Name Middle Nam	n Blaisdell Last Name	Case number (it known)				
For your attorney, if you are represented by one for you are not represented by an attorney, you do not	I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligib to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to the debto the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have r knowledge after an inquiry that the information in the schedules filed with the petition is incorrect.					
need to file this page.	*	Date	MM / DD /YYYY			
	Signature of Attorney for Debtor		MM / DD /YYYY			
	Printed name					
	Plantage					
	Firm name					
	Number Street					
	City	State	ZIP Code			
	2 1 1 1 1 1 2 2	Email address	s			
	Contact phone					
	Bar number	State				

Case 19-42048 Doc 1 Filed 07/08/19 Entered 07/08/19 15:15:07 Desc Main Document Page 8 of 118

Debtor 1	Brandon First Name N	Allen iddle Name	Blaisdell Last Name	Case number (# known)
For you i bankrup attorney	if you are filing tcy without an	this	should under	s you, as an individual, to represent yourself in bankruptcy court, but you rstand that many people find it extremely difficult to represent successfully. Because bankruptcy has long-term financial and legal es, you are strongly urged to hire a qualified attorney.
an attorr	e represented be ney, you do not file this page.	y	To be success technical, and dismissed because hearing, or coofirm if your case	ful, you must correctly file and handle your bankruptcy case. The rules are very a mistake or inaction may affect your rights. For example, your case may be ause you did not file a required document, pay a fee on time, attend a meeting or operate with the court, case trustee, U.S. trustee, bankruptcy administrator, or audit se is selected for audit. If that happens, you could lose your right to file another hay lose protections, including the benefit of the automatic stay.
			You must list a court. Even if y in your schedu property or pro also deny you case, such as cases are range.	all your property and debts in the schedules that you are required to file with the you plan to pay a particular debt outside of your bankruptcy, you must list that debt ules. If you do not list a debt, the debt may not be discharged. If you do not list operly claim it as exempt, you may not be able to keep the property. The judge can a discharge of all your debts if you do something dishonest in your bankruptcy destroying or hiding property, falsifying records, or lying. Individual bankruptcy domly audited to determine if debtors have been accurate, truthful, and complete. raud is a serious crime; you could be fined and imprisoned.
			If you decide thired an attorn successful, you Bankruptcy Programme to the successful of the successfu	to file without an attorney, the court expects you to follow the rules as if you had ney. The court will not treat you differently because you are filing for yourself. To be our must be familiar with the United States Bankruptcy Code, the Federal Rules of rocedure, and the local rules of the court in which your case is filed. You must also the any state exemption laws that apply.
			Are you award consequence No Yes	e that filing for bankruptcy is a serious action with long-term financial and legal s?
			Are you awar	e that bankruptcy fraud is a serious crime and that if your bankruptcy forms are incomplete, you could be fined or imprisoned?
			No No	or agree to pay someone who is not an attorney to help you fill out your bankruptcy forms? e of Person David Adams th Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).
			By signing he	ere, I acknowledge that I understand the risks involved in filing without an attorney. Indunderstood this notice, and I am aware that filing a bankruptcy case without an accuse me to lose my rights or property if I do not properly handle the case.
			* Bende	Blankl * Dryc Blandel
			Signature of Date	Debtor 1 Signature of Debtor 2 O7 - O1 - JO19 MM / DD / YYYY Date O7 01 A019 MM / DD / YYYY
			Contact phone	Contact phone
			Cell phone	(320)496-7698 Cell phone $(340)703-8892$
			Email address	teamblaisdell@hotmail.com Email address teamblaisdell@hotmail.com

	Brandon	Allen	Blaisdell
ebtor 1	First Name	Middle Name	Last Name
	Tonya	Draughon	Blaisdell
Debtor 2 (Spouse, if filin		Middle Name	Last Name
United State	s Bankruptcy Court fo	or the: District of Minnesota	1

Official Form 119

Bankruptcy Petition Preparer's Notice, Declaration, and Signature

12/15

Bankruptcy petition preparers as defined in 11 U.S.C. § 110 must fill out this form every time they help prepare documents that are filed in the case. If more than one bankruptcy petition preparer helps with the documents, each must sign in Part 2. A bankruptcy petition preparer who does not comply with the provisions of title 11 of the United States Code and the Federal Rules of Bankruptcy Procedure may be fined, imprisoned, or both. 11 U.S.C. § 110; 18 U.S.C. § 156.

Part 1:

Notice to Debtor

Bankruptcy petition preparers must give the debtor a copy of this form and have the debtor sign it before they prepare any documents for filing or accept any compensation. A signed copy of this form must be filed with any document prepared.

Bankruptcy petition preparers are not attorneys and may not practice law or give you legal advice, including the following:

- whether to file a petition under the Bankruptcy Code (11 U.S.C. § 101 et seq.);
- whether filing a case under chapter 7, 11, 12, or 13 is appropriate;
- whether your debts will be eliminated or discharged in a case under the Bankruptcy Code;
- whether you will be able to keep your home, car, or other property after filing a case under the Bankruptcy Code;
- what tax consequences may arise because a case is filed under the Bankruptcy Code;
- whether any tax claims may be discharged;
- whether you may or should promise to repay debts to a creditor or enter into a reaffirmation agreement;
- how to characterize the nature of your interests in property or your debts; or
- what procedures and rights apply in a bankruptcy case.

The bankruptcy petition preparer	David Adams	has notified me of
The pankingtey pention propare.	Name e preparing any document for filing or accept	ting any fee.
Bundo Bland Signature of Debtor 1 acknowledging re	Celpt of this notice	Date O7-01-3019
Jony Blandoll Signature of Debtor 2 acknowledging re	ceipt of this notice	Date 07-01-2019

Case 19-42048 Doc 1 Filed 07/08/19 Entered 07/08/19 15:15:07 Desc Main Document Page 10 of 118

Declaration and Signature of the Bankruptcy Petition Preparer Dinder penalty of perjury, I declare that: I am a bankruptcy petition preparer or the officer, principal, responsible person, or partner of a bankruptcy petition preparer; I or my firm prepared the documents listed below and gave the debtor a copy of them and the Notice to Debtor by Bankruptcy Petition Preparer as required by 11 U.S.C. § \$ 110(h), and 342(b); and If rules or guidelines are established according to 11 U.S.C. § 110(h), and 342(b); and If rules or guidelines are established according to 11 U.S.C. § 110(h), and 342(b); and If rules or guidelines are established according to 11 U.S.C. § 110(h), and 342(b); and If rules or guidelines are established according to 11 U.S.C. § 110(h), and 342(b); and If rules or guidelines are established according to 11 U.S.C. § 110(h), and 342(b); and David Adams Paralegal/BPP Pinnted name Tale, if any Firm name, if it applies Pinn name, if it applies I or my firm prepared the documents checked below and the completed declaration is made a part of each document that I check (Check all that apply.) I or my firm prepared the documents checked below and the completed declaration is made a part of each document that I check (Check all that apply.) I ovoluntary Petition (Form 101) I of Schedule J (Form 106) I of Schedule J (Form 106) I of Schedule S (Form 106AB) I of Schedule S (Form 106AB) I of Schedule S (Form 106C) I of Schedule S (Form 106C) I of Schedule D (Form 106C) I of Schedule D (Form 106C) I of Schedule D (Form 106C) I of Schedule S (Form 106C) I o	tor 1	Brandon	Allen		Blaisdell	Case number	if know	1)
I am a bankrupkcy petition preparer or the officer, principal, responsible person, or partner of a bankruptcy petition preparer; I am a bankrupkcy petition preparer or the officer, principal, responsible person, or partner of a bankruptcy petition preparer; I or my firm prepared the documents listed below and gave the debtor a copy of them and the Notice to Debtor by Bankruptcy Petition Preparer as required by 11 U.S.C. § \$110(b), 110(b), and 342(b); and If rules or guidellines are established according to 11 U.S.C. § 110(h) setting a maximum fee for services that bankruptcy petition preparers may change, I or my firm notified the debtor of the maximum amount before preparing any document for filing or before accepting any fee from the debtor. David Adams Paralegal/BPP Printed name Titio, If my Firm name, If it applies Lor my firm prepared the documents checked below and the completed declaration is made a part of each document that I check (Check all that apply). Lor my firm prepared the documents checked below and the completed declaration is made a part of each document that I check (Check all that apply). Lor my firm prepared the documents checked below and the completed declaration is made a part of each document that I check (Check all that apply). Schedule All (Form 1001) Schedule All (Form 1004) Schedule All (Form 1005) Schedule Bright (Form 1005) Schedule All (Form 1005) Schedule All (Form 1005) Sch	.01	, 600 (100110						
I am a bankruptcy petition preparer or the officer, principal, responsible person, or partner of a bankruptcy petition preparer. I or my firm prepared the documents listed below and agave the debtor a copy of them and the <i>Notice to Debtor by Bankruptcy Petition Preparer</i> as required by 11 U.S.C. § \$110(h), 10(h), and 342(b); and preparer as required by 11 U.S.C. § \$110(h), 10(h), and 342(b); and preparer as required by 11 U.S.C. § \$110(h), 10(h), and 342(b); and preparer as required by 11 U.S.C. § \$110(h) setting a maximum fee for services that bankruptcy petition preparers may charge, I or my firm preparers may charge, I or my firm preparer as required before accepting any fee from the debtor. David Adams Paralegal/BPP Printed name 2140 Maywood Drive Number Street Birmingham Al 35214 206-515-3574 City Street Birmingham Al 35214 206-515-3574 City Contact phone I or my firm prepared the documents checked below and the completed declaration is made a part of each document that I chec (Check all finat apply.) I or my firm prepared the documents checked below and the completed declaration is made a part of each document that I chec (Check all finat apply.) I or my firm prepared the documents checked below and the completed declaration is made a part of each document that I chec (Check all finat apply.) I or my firm prepared the documents checked below and the completed declaration is made a part of each document that I chec (Check all finat apply.) I or my firm prepared the documents checked below and the completed declaration is made a part of each document that I chec (Check all finat apply.) I or my firm prepared the documents checked below and the completed declaration is made a part of each document that I chec (Check all finat apply.) Schedule I form 1080	art 2:	Declaration a	nd Signature of the B	ankrı	uptcy Petition	n Preparer		
Signature of bankruptcy petition preparer or officer, principal, responsible Signature of bankruptcy petition preparer or officer, principal, responsible Social Security number of person who signed	I am I or n Prep if rule prep acce	penalty of perjury, a bankruptcy petition of firm prepared the parer as required by arers may charge, apting any fee from twid Adams Feed name	I declare that: ion preparer or the office ne documents listed belo y 11 U.S.C. §§ 110(b), 1 e established according I or my firm notified the the debtor. Paralegal/BPP Title, if any	r, prin w and 10(h), to 11 debto	cipal, responsit gave the debto and 342(b); an U.S.C. § 110(h) r of the maximu	ole person, or partner of a or a copy of them and the id) setting a maximum fee fo im amount before preparir	Notic	rvices that bankruptcy petition
I or my firm prepared the documents checked below and the completed declaration is made a part of each document that I checked litter apply.)								
I or my firm prepared the documents checked below and the completed declaration is made a part of each document that I check (Check all that apply.) Voluntary Petition (Form 101)	Bir	mingham						-
Check all that apply-) Voluntary Petition (Form 101)	City					•		
✓ Voluntary Petition (Form 101) Statement About Your Social Security Numbers (Form 106J) Income (Form 122B) ✓ Statement About Your Assets and Liabilities and Certain Statistical Information (Form 106Sum) ✓ Schedule J (Form 106Dec) Chapter 13 Statement of Your Current Monincome and Calculation of Commitment Petic (Form 106F) ✓ Schedule Alk (Form 106A/B) ✓ Statement of Financial Affairs (Form 107) Chapter 13 Calculation of Commitment Petic (Form 106Dec) ✓ Schedule Alk (Form 106A/B) ✓ Statement of Financial Affairs (Form 107) Chapter 13 Calculation of Your Current (Form 102C-1) ✓ Schedule Alk (Form 106A/B) ✓ Statement of Financial Affairs (Form 107) Chapter 7 Statement of Your Current (Form 108) ✓ Schedule D (Form 106D) ✓ Chapter 7 Statement of Your Current Monincome (Form 122A-1) Application to Pay Filing Fee in Installments (Form 103A) ✓ Schedule B (Form 106B) ✓ Statement of Exemption from Presumption of Abuse Under § 707(b)(2) ✓ A list of names and addresses of all credite (creditor or mailing matrix) ✓ Chapter 7 Means Test Calculation (Form 122A-2) Other Bankruptcy petition preparers must sign and give their Social Security number of each preparer must be provided. 11 U.S.C. § 110. Bankruptcy petition preparer or officer, principal, responsible person, or partner 4 6 4 - 2 5 - 7 7 8 7 8 7 Social Security number of person who signed Date MM/DD/YYYY			I the documents check	_				
Salateriest Note Note Note Note Note Note Note Not							السا	Income (Form 122B)
Certain Statistical Information (Form 106Sum) Statement of Financial Affairs (Form 107) Chapter 13 Calculation of Your Disposable Income (Form 122C-2) Schedule C (Form 106C) Schedule D (Form 106D) Schedule E/F (Form 106E/F) Schedule G (Form 106G) Schedule G (Form 108H) Chapter 7 Statement of Vour Current Monthly Income (Form 122A-1) Schedule G (Form 108H) Chapter 7 Statement of Your Current Monthly Income (Form 103A) Schedule H (Form 108H) Chapter 7 Statement of Exemption from Presumption of Abuse Under § 707(b)(2) (Form 122A-1Supp) Chapter 7 Means Test Calculation (Form 122A-2) Bankruptcy petition preparers must sign and give their Social Security numbers. If more than one bankruptcy petition preparer prepared the docum to which this declaration applies, the signature and Social Security number of each preparer must be provided. 11 U.S.C. § 110. Bankruptcy petition preparer or officer, principal, responsible person, or partner David Adams Printed name Signature of bankruptcy petition preparer or officer, principal, responsible Social Security number of person who signed Social Security number of person who signed Date MM/DD/YYYY Date MM/DD/YYYY Date MM/DD/YYYY Date MM/DD/YYYY		(Form 121)		_	Declaration Abo	ut an Individual Debtor's		Income and Calculation of Commitment Period
Schedule A/B (Form 106A/B) Schedule C (Form 106C) Chapter 7 (Form 108) Schedule E/F (Form 106E/F) Statement of Exemption from Presumption of Abuse Under § 707(b)(2) (Form 122A-1) Schedule H (Form 106H) Chapter 7 Means Test Calculation (Form 122A-2) Bankruptcy petition preparers must sign and give their Social Security numbers. If more than one bankruptcy petition preparer prepared the docum to which this declaration and Social Security number of each preparer must be provided. 11 U.S.C. § 110. David Adams Printed name Signature of bankruptcy petition preparer or officer, principal, responsible Signature of bankruptcy petition preparer or officer, principal, responsible Date MM/DD/YYYY Date MM/DD/YYYY MM/DD/YYYY Date MM/DD/YYYY MM/DD/YYYY Date MM/DD/YYYY	M	Summary of Your As	ssets and Liabilities and formation (Form 106Sum)	1.7				•
Schedule C (Form 106C) Under Chapter 7 (Form 108) Chapter 7 Statement of Your Current Monthly Income (Form 122A-1) Schedule E/F (Form 106E/F) Schedule E/F (Form 106E/F) Schedule G (Form 106G) Schedule G (Form 106G) Chapter 7 Statement of Exemption from Presumption of Abuse Under § 707(b)(2) (Form 122A-1Supp) Chapter 7 Means Test Calculation (Form 122A-2) Bankruptcy petition preparers must sign and give their Social Security numbers. If more than one bankruptcy petition preparer prepared the docum to which this declaration applies, the signature and Social Security number of each preparer must be provided. 11 U.S.C. § 110. Bankruptcy petition preparer or officer, principal, responsible person, or partner David Adams Printed name Signature of bankruptcy petition preparer or officer, principal, responsible signature of person who signed Date MM/DD/YYYY MM/DD/YYYY				_				Income (Form 122C-2)
Application to Have Chapter 7 Filing Fee Waived (Form 108E/F) Schedule E/F (Form 108E/F) Schedule G (Form 106G) Schedule H (Form 106H) Schedule H (Form 106H) Chapter 7 Statement of Exemption from Presumption of Abuse Under § 707(b)(2) (Form 122A-1Supp) Chapter 7 Means Test Calculation (Form 122A-2) Bankruptcy petition preparers must sign and give their Social Security numbers. If more than one bankruptcy petition preparer prepared the document to which this declaration applies, the signature and Social Security number of each preparer must be provided. 11 U.S.C. § 110. Signature of bankruptcy petition preparer or officer, principal, responsible person, or partner David Adams Printed name Signature of bankruptcy petition preparer or officer, principal, responsible social Security number of person who signed Social Security number of person who signed Date MM/DD/YYYY Date MM/DD/YYYY				تيون	Under Chapter	7 (Form 108)		Application to Pay Filing Fee in Installments
Schedule E/F (Form 106E/F) Statement of Exemption from Presumption of Abuse Under § 707(b)(2) (Form 122A-1Supp) Chapter 7 Means Test Calculation (Form 122A-2) Bankruptcy petition preparers must sign and give their Social Security numbers. If more than one bankruptcy petition preparer prepared the document to which this declaration applies, the signature and Social Security number of each preparer must be provided. 11 U.S.C. § 110. Signature of bankruptcy petition preparer or officer, principal, responsible person, or partner David Adams Printed name Signature of bankruptcy petition preparer or officer, principal, responsible social Security number of person who signed Social Security number of person who signed Date MM/DD/YYYY Date MM/DD/YYYYY Date MM/DD/YYYYY Date MM/DD/YYYYY Date MM/DD/YYYYY	4	Schedule D (Form 1	06D)	Z	Chapter 7 State	ement of Your Current	Z 1	•
Schedule G (Form 106G) Schedule H (Form 106H) Chapter 7 Means Test Calculation (Form 122A-1) Chapter 7 Means Test Calculation (Form 122A-2) Bankruptcy petition preparers must sign and give their Social Security numbers. If more than one bankruptcy petition preparer prepared the document to which this declaration applies, the signature and Social Security number of each preparer must be provided. 11 U.S.C. § 110. Signature of bankruptcy petition preparer or officer, principal, responsible person, or partner David Adams Printed name Signature of bankruptcy petition preparer or officer, principal, responsible social Security number of person who signed Date MM/DD/YYYY Social Security number of person who signed Date MM/DD/YYYY	Ø	Schedule E/F (Form	106E/F)	П				Waived (Form 103B)
Chapter 7 Means Test Calculation (Form 122A-2) Bankruptcy petition preparers must sign and give their Social Security numbers. If more than one bankruptcy petition preparer prepared the document to which this declaration applies, the signature and Social Security number of each preparer must be provided. 11 U.S.C. § 110. Signature of bankruptcy petition preparer or officer, principal, responsible person, or partner David Adams Printed name Date MM/DD/YYYY Social Security number of person who signed Date MM/DD/YYYY Social Security number of person who signed Date MM/DD/YYYY	A	Schedule G (Form 1	106G)	-	of Abuse Under	r § 707(b)(2)	Ø	A list of names and addresses of all creditors
to which this declaration applies, the signature and Social Security number of each proposition matter. 4 6 4 - 2 5 - 7 7 8 7 Signature of bankruptcy petition preparer or officer, principal, responsible person, or partner David Adams Printed name Signature of bankruptcy petition preparer or officer, principal, responsible Social Security number of person who signed Date MM/DD/YYYY	Ø	Schedule H (Form 1	106H)	Ø	Chapter 7 Mea			
Printed name Date Signature of bankruptcy petition preparer or officer, principal, responsible Social Security number of person who signed MM / DD / YYYY	to	which this declaration	op applies, the signature a	ina Sa	ociai Security Itul	mber of each property mass		1/4./6.
person, or partner	Pr	inted name	natition preparer or officer of	incipal	responsible	Social Security number of	perso	
	Si pe	ignature of bankruptcy erson, or partner	pennon preparer or orneer, pr			-		

Case 19-42048 Doc 1 Filed 07/08/19 Entered 07/08/19 15:15:07 Desc Main Document Page 11 of 118

Fill in this in	formation to ide	ntify your case:	
Debtor 1 Debtor 2 (Spouse, if filing)	Brandon First Name Tonya	Allen Middle Name Draughon Middle Name	Blaisdell Last Name Blaisdell Last Name
United States	Bankruptcy Court fo	or the: District of Minnesota	
Case number (If known)	,, ,, ,, ,, ,, ,, ,, ,, ,, ,, ,, ,, ,,		

Official Form 106Dec

Declaration About an Individual Debtor's Schedules

12/15

If two married people are filing together, both are equally responsible for supplying correct information.

You must file this form whenever you file bankruptcy schedules or amended schedules. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Sign Below	
Did you pay or agree to pay someone who is NO	T an attorney to help you fill out bankruptcy forms?
☐ No ☑ Yes. Name of person David Adams	Attach Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).
Under penalty of perjury, I declare that I have rethat they are true and correct.	ad the summary and schedules filed with this declaration and
* Bunda Blandell Signature of Debtor 1	Signature & Debtor 2
Date 07-01-3019	Date 07 01 001 9 MM / DD / YYYY

Case 19-42048 Doc 1 Filed 07/08/19 Entered 07/08/19 15:15:07 Desc Main Page 12 of 118 Document

Debtor 1 Brandon Allen Blaisdell First Name Middle Name Last Name Debtor 2 Tonya Draughon Blaisdell (Spouse, if filling) First Name Middle Name Last Name United States Bankruptcy Court for the: District of Minnesota	Fill in this in	nformation to identify	your case:	
	Debtor 2	First Name Tonya	Middle Name Draughon	Last Name Blaisdell

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new Summary and check the box at the top of this page.

1: Summarize Your Assets	Your assets Value of what you own
Schedule A/B: Property (Official Form 106A/B) Ia. Copy line 55, Total real estate, from Schedule A/B	\$
tb. Copy line 62, Total personal property, from Schedule A/B	\$35,901.00
1c. Copy line 63, Total of all property on Schedule A/B	\$35,901.00
rt 2: Summarize Your Liabilities	
	Your liabilities Amount you owe
Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) 2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D	\$
Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F	. 17.157.00
3a. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F	+ \$ <u>187,905.51</u>
Your total liabilities	\$ 205,062.51
art 3: Summarize Your Income and Expenses	
	\$1,684.97
Copy your combined monthly income from line 12 of Schedule 1	2 660 00
Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22c of Schedule J	\$\$

12/15

Case 19-42048 Doc 1 Filed 07/08/19 Entered 07/08/19 15:15:07 Desc Main Document Page 13 of 118

	Brandon	Allen	Blaisdell ca	ase number (if known)	, <u>, , , , , , , , , , , , , , , , , , </u>
Debtor 1	First Name Middle Nam				
			and that all Departs		
Part 4	Answer These Que	estions for Adminis	strative and Statistical Record		
c Aro	you filing for bankruptcy	under Chapters 7, 1	1, or 13?	•	
6. Are	you ming for burning to	anort on this part of the	form. Check this box and submit this	form to the court with your other	schedules.
	No. You have nothing to re Yes	eport on this part of the	Toma succession		10
A7 1	Yes 				
7. Wha	at kind of debt do you ha	ve?			
Ø	Your debts are primarily	consumer debts. Co.	nsumer debts are those "incurred by a	an individual primarily for a perso	nai,
	family or household purpo	ose." 11 U.S.C. 3 101(4	5). I III Out intoo o og		
	Your debts are not prim	arily consumer debts	. You have nothing to report on this pa	art of the lottle. Check this box ar	<u> </u>
	this form to the court with	your other schedules.		and the second s	
			Community total current monthly	income from Official	4 694 07
8. Fro	om the <i>Statement of You</i> rm 122A-1 Line 11; OR , Fo	<i>r Current Monthly Inc</i> orm 122B Line 11; OR ,	ome: Copy your total current monthly, Form 122C-1 Line 14.		\$1,684.97
ro	IIII 122A-1 Line 11, Gra				
1					
9 Cr	ony the following special	categories of claims	from Part 4, line 6 of Schedule E/F:		
9. 00	ppy the renorms - r				
				Total claim	
		= = the follows	ina:		
	From Part 4 on Schedule	E/F, copy the following	mg.		
		tions (Copy line 6a.)		\$9,905.00	
9	a. Domestic support obliga	flioris (Copy line out.)		0.00	
. 0	b. Taxes and certain other	debts you owe the gov	vernment. (Copy line 6b.)	\$	_
				\$ 0.00	
9	c. Claims for death or pers	sonal injury while you w	vere intoxicated. (Copy line 6c.)	Ψ	
				\$51,782.45	<u>5</u>
9	d. Student loans. (Copy lin	ne 6f.)			
	Obligations origing Out	of a separation agreen	nent or divorce that you did not report	as <u>\$</u> 0.00	<u>)</u>
,	priority claims. (Copy li	ne 6g.)			
1	ne p) to to consist or are	off-charing plans, and	other similar debts. (Copy line 6h.)	+ \$0.0	<u>0</u>
	91. Debts to pension of pro	our onaims house and			7
ŧ	9g. Total. Add lines 9a thr	ough 9f.		\$ <u>61,687.4</u>	<u>5</u>
	ag. 1 otai. Add ililes aa tiil	ough on			

Case 19-42048 Doc 1 Filed 07/08/19 Entered 07/08/19 15:15:07 Desc Main Page 14 of 118 Document

Fill in this ir	nformation to ider	ntify your case and this fil	ing:
Debtor 2 (Spouse, if filing		Allen Middle Name Draughon Middle Name r the: District of Minnesota	Blaisdell Last Name Blaisdell Last Name
Case number			

Official Form 106A/B

Schedule A/B: Property

12/15

In each category, separately list and describe items. List an asset only once. If an asset fits in more than one category, list the asset in the category where you think it fits best. Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Describe Each Residence, Building, Land, or Other Real Estate You Own or Have an Interest In

No. Go to Part 2. Yes. Where is the property? 1. Street address, if available, or other description	What is the property? Check all that apply. ☐ Single-family home ☐ Duplex or multi-unit building	Do not deduct secured claim the amount of any secured Creditors Who Have Claims Current value of the	Secured by Property.
Street address, if available, or other description	Condominium or cooperativeManufactured or mobile home	entire property?	portion you own?
	Land	\$	\$
City State ZIP Code	Investment property Timeshare Other	Describe the nature of interest (such as fee sthe entireties, or a life	imple, tenancy by
	Who has an interest in the property? Check one.		
County	☐ Debtor 1 only ☐ Debtor 2 only ☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another Other information you wish to add about this is property identification number:	Check if this is co (see instructions) tem, such as local	mmunity property
f you own or have more than one, list here:	What is the property? Check all that apply. Single-family home	Do not deduct secured cl the amount of any secure Creditors Who Have Clai	in claims on actioning D.
1.2. Street address, if available, or other description	 Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home 	Current value of the entire property?	Current value of th portion you own?
City State ZIP Cod	Land Investment property Timeshare Other	the entireties, or a li	simple, tenancy by
County	Who has an interest in the property? Check one Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another		community property

Case 19-42048 Doc 1 Filed 07/08/19 Entered 07/08/19 15:15:07 Desc Main Document Page 15 of 118

	randon	Allen	Blaisdell	Case number (# know	n)	
Fire	rst Name Middle Name	(25) Ivaille	What is the property? Check all th	at apply.	Do not deduct secured cla	ims or exemptions. Put
					Do not deduct secured claim the amount of any secured Creditors Who Have Claim	is Secured by Property.
			Single-family homeDuplex or multi-unit building			
3. Street	address, if available, or o	other description			Current value of the	portion you own?
			Condominium or cooperativeManufactured or mobile home	-	entire property?	portion you and
					\$	\$
			Land			
			Investment property		Describe the nature of interest (such as fee	of your ownership
City		State ZIP Code	Timeshare		the entireties, or a life	e estate), if known.
			Other	nerty? Check one.		
			Who has an interest in the pro	Jeity: Oncok onc.		
			Debtor 1 only			
Count	nty		Debtor 2 only		Check if this is co	ommunity property
			Debtor 1 and Debtor 2 only	onother	(see instructions)	
			At least one of the debtors and		m euch as local	
			Other information you wish to property identification number	r:	iii, suoii uo iotai	
			or from Dort 1 int	·luding any entries	for pages	\$ 0.00
dd the do	ollar value of the por	tion you own for	all of your entries from Part 1, inc	auding any oner		Ψ
	escribe Your Ve					l.
you own, own that	i, lease, or have lega l someone else drives	l or equitable inte . If you lease a veh	rest in any vehicles, whether the icle, also report it on Schedule G: E	y are registered or Executory Contracts	not? Include any vehic and Unexpired Leases	eles
you own, own that Cars, var		l or equitable inte . If you lease a veh	noisy also ver	y are registered or Executory Contracts	not? Include any vehic and Unexpired Leases	eles :
you own, own that Cars, var	i, lease, or have lega l someone else drives	l or equitable inte . If you lease a veh	noisy district	y are registered or Executory Contracts	not? Include any vehic and Unexpired Leases	eles ;
you own, own that Cars, var	i, lease, or have lega l someone else drives	l or equitable inte . If you lease a veh	les, motorcycles		De not deduct secured	t claims or exemptions. Put
you own, own that Cars, var No Var	, lease, or have legal someone else drives ns, trucks, tractors, s	l or equitable inte . If you lease a veh	noisy district		Do not deduct secured	d claims or exemptions. Put
you own, own that Cars, var No Yes 3.1. Ma	i, lease, or have legal i someone else drives ns, trucks, tractors, s ake:	l or equitable inte . If you lease a veh sport utility vehic Chrysler	les, motorcycles		Do not deduct secured	i claims or exemptions. Put tured claims on Schedule D: Claims Secured by Property.
you own, own that Cars, var No Yes 3.1. Ma	, lease, or have legal someone else drives ns, trucks, tractors, s	or equitable inte If you lease a veh sport utility vehic Chrysler Pacifica	les, motorcycles Who has an interest in the p □ Debtor 1 only □ Debtor 2 only		Do not deduct secured the amount of any secureditors Who Have Courrent value of the	i claims or exemptions. Put sured claims on Schedule D: Claims Secured by Property. The Current value of the
you own, own that Cars, var No Yes 3.1. Ma	i, lease, or have legal i someone else drives ns, trucks, tractors, s ake:	or equitable inte If you lease a veh sport utility vehic Chrysler Pacifica 2007	Who has an interest in the p Debtor 1 only Debtor 2 only Debtor 2 and Debtor 2 only	roperty? Check one.	Do not deduct secured	i claims or exemptions. Put sured claims on Schedule D: Claims Secured by Property. The Current value of the
you own, own that Cars, var No Yes 3.1. Ma	i, lease, or have legal someone else drives ns, trucks, tractors, s ake: lodel:	or equitable inte If you lease a veh sport utility vehic Chrysler Pacifica	les, motorcycles Who has an interest in the p □ Debtor 1 only □ Debtor 2 only	roperty? Check one.	Do not deduct secured the amount of any secureditors Who Have Courrent value of the entire property?	d claims or exemptions. Put ured claims on Schedule D. Claims Secured by Property. he Current value of the portion you own?
you own, own that Cars, var No Yes 3.1. Ma	i, lease, or have legal i someone else drives ns, trucks, tractors, s ake: lodel: ear: pproximate mileage:	or equitable inte If you lease a veh sport utility vehic Chrysler Pacifica 2007	Who has an interest in the p Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors a	roperty? Check one. ind another	Do not deduct secured the amount of any secureditors Who Have Courrent value of the	d claims or exemptions. Put ured claims on Schedule D. Claims Secured by Property. he Current value of the portion you own?
you own, own that Cars, var No Yes 3.1. Ma	i, lease, or have legal someone else drives ns, trucks, tractors, s ake: lodel:	or equitable inte If you lease a veh sport utility vehic Chrysler Pacifica 2007	Who has an interest in the p Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors a	roperty? Check one. ind another	Do not deduct secured the amount of any secureditors Who Have Courrent value of the entire property?	d claims or exemptions. P sured claims on Schedule Claims Secured by Proper the Current value of portion you owr
you own, own that Cars, var No Yes 3.1. Ma	a, lease, or have legal someone else drives ns, trucks, tractors, s ake: lodel: ear: pproximate mileage: other information:	or equitable inte If you lease a veh sport utility vehic Chrysler Pacifica 2007 169978	Who has an interest in the p Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors a Check if this is communinstructions)	roperty? Check one. ind another	Do not deduct secured the amount of any secureditors Who Have Courrent value of the entire property? \$	d claims or exemptions. Put ured claims on Schedule D Claims Secured by Property the Current value of t portion you own? 2,673.0
you own, own that Cars, var No Yes 3.1. Ma	i, lease, or have legal i someone else drives ns, trucks, tractors, s ake: lodel: ear: pproximate mileage:	I or equitable inte. If you lease a vehice port utility vehice. Chrysler Pacifica 2007 169978 one, describe here.	Who has an interest in the p Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors a Check if this is commun instructions)	roperty? Check one. and another ity property (see	Do not deduct secured the amount of any secureditors Who Have Courrent value of the entire property? \$ 2,673.0	d claims or exemptions. Put sured claims on Schedule D: Claims Secured by Property. the Current value of the portion you own? 2,673.0
you own, own that Cars, var No Yes 3.1. Ma Ye Ap O	a, lease, or have legal someone else drives ns, trucks, tractors, s ake: lodel: ear: pproximate mileage: other information:	Chrysler Pacifica 2007 169978 one, describe here	Who has an interest in the p Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors a Check if this is commun instructions) Who has an interest in the	roperty? Check one. and another ity property (see	Do not deduct secured the amount of any secureditors Who Have Courrent value of the entire property? \$ 2,673.0	d claims or exemptions. Put sured claims on Schedule Dictaims Secured by Property. The Current value of the portion you own? 2,673.0 ded claims or exemptions. Put sured claims on Schedule Learners.
you own, own that Cars, var No Yes 3.1. Ma Ye Ap O' If you ow	a, lease, or have legal someone else drives ns, trucks, tractors, sake: lodel: ear: pproximate mileage: other information:	I or equitable inte. If you lease a vehice port utility vehice. Chrysler Pacifica 2007 169978 one, describe here.	Who has an interest in the p Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors a Check if this is commun instructions) Who has an interest in the Debtor 1 only	roperty? Check one. and another ity property (see	Do not deduct secured the amount of any sec Creditors Who Have Courrent value of the entire property? \$	d claims or exemptions. Put cured claims on Schedule D: Claims Secured by Property. The Current value of the portion you own? DO \$ 2,673.0 The claims or exemptions. Put caured claims on Schedule IC Claims Secured by Property.
you own, own that Cars, var No Yes 3.1. Ma Ye Ar O' If you ow 3.2. M	ake: hyperoximate mileage: hyperoximate mileage: hyperoximate more than hake: hake: hake: hyperoximate more than hake: hake:	Chrysler Pacifica 2007 169978 one, describe here	Who has an interest in the p Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors a Check if this is commun instructions) E: Who has an interest in the Debtor 1 only Debtor 2 only	roperty? Check one. Ind another Ity property (see	Do not deduct secured the amount of any sec Creditors Who Have Courrent value of the entire property? \$ 2,673.0 Do not deduct secure the amount of any sec Creditors Who Have Courrent value of	d claims or exemptions. Put cured claims on Schedule D: Claims Secured by Property. the Current value of the portion you own? 2,673.0 ded claims or exemptions. Put cured claims on Schedule Eclaims Secured by Property.
you own, own that Cars, var No Yes 3.1. Ma Ye Ap O' If you ow 3.2. M	ake: contact information: which or have legal asomeone else drives ake: codel: ear: cother information: which or have more than Make: Model: Year:	Chrysler Pacifica 2007 169978 one, describe here Ford truck 2006	Who has an interest in the p Debtor 1 only Debtor 2 only At least one of the debtors a Check if this is commun instructions) Who has an interest in the Debtor 1 only Debtor 2 only	roperty? Check one. ind another ity property (see	Do not deduct secured the amount of any sec Creditors Who Have Courrent value of the entire property? \$	d claims or exemptions. Put ured claims on Schedule D: Claims Secured by Property. the Current value of the portion you own? 2,673.0 ded claims or exemptions. Put cured claims on Schedule E Claims Secured by Property.
you own, own that Cars, var No Yes 3.1. Ma Ye Ap O' If you ow 3.2. M	ake: hyperoximate mileage: hyperoximate mileage: hyperoximate more than hake: hake: hake: hyperoximate more than hake: hake:	Chrysler Pacifica 2007 169978 one, describe here	Who has an interest in the p Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors a Check if this is commun instructions) E: Who has an interest in the Debtor 1 only Debtor 2 only	roperty? Check one. ind another ity property (see	Do not deduct secured the amount of any sec Creditors Who Have Courrent value of the entire property? \$ 2,673.00 Do not deduct secure the amount of any sec Creditors Who Have Courrent value of entire property?	d claims or exemptions. Put cured claims on Schedule D: Claims Secured by Property. The Current value of the portion you own? DO \$ 2,673.0 The claims or exemptions. Put curred claims on Schedule E Claims Secured by Property the Current value of portion you own?
you own, own that Cars, var No Yes 3.1. Ma Ye Ap O If you ov 3.2. M	ake: contact information: which or have legal asomeone else drives ake: codel: ear: cother information: which or have more than Make: Model: Year:	Chrysler Pacifica 2007 169978 one, describe here Ford truck 2006	Who has an interest in the p Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors a Check if this is commun instructions) E: Who has an interest in the Debtor 1 only Debtor 2 only At least one of the debtors a	roperty? Check one. Ind another Ity property (see property? Check one.	Do not deduct secured the amount of any sec Creditors Who Have Courrent value of the entire property? \$ 2,673.0 Do not deduct secure the amount of any sec Creditors Who Have Courrent value of	d claims or exemptions. Put cured claims on Schedule D: Claims Secured by Property. The Current value of the portion you own? DO \$ 2,673.0 The claims or exemptions. Put curred claims on Schedule E Claims Secured by Property the Current value of portion you own?
you own, own that Cars, var No Yes 3.1. Ma Ye Ap O If you ov 3.2. M	ake: lodel: ear: hyproximate mileage: who or have more than whake: whodel: Year: Approximate mileage:	Chrysler Pacifica 2007 169978 one, describe here Ford truck 2006	Who has an interest in the p Debtor 1 only Debtor 2 only At least one of the debtors a Check if this is commun instructions) Who has an interest in the Debtor 1 only Debtor 2 only	roperty? Check one. Ind another Ity property (see property? Check one.	Do not deduct secured the amount of any sec Creditors Who Have Courrent value of the entire property? \$ 2,673.00 Do not deduct secure the amount of any sec Creditors Who Have Courrent value of entire property?	d claims or exemptions. Put cured claims on Schedule D. Claims Secured by Property. The Current value of the portion you own? DO \$ 2,673.0 Ed claims or exemptions. Put curred claims on Schedule In Claims Secured by Property. The Current value of portion you own

Case 19-42048 Doc 1 Filed 07/08/19 Entered 07/08/19 15:15:07 Desc Main Document Page 16 of 118

1	Brandon A	llen Blaisdell Case number (# known		
	First Name Middle Name	Last Name		
		Who lies all litterest in the barrens	Do not deduct secured clain the amount of any secured	claims on achequie e.
. 1	Make:	Debtor 1 only	the amount of any secured Creditors Who Have Claim	s Secured by Property.
4	Model:	E Debter 1 stray		Current value of the
,	/ear:	— Debtor 1 and Debtor 2 only	entire property?	portion you own?
	Approximate mileage:	At least one of the debtors and another	-	
	• •		\$	\$
(Other information:	Check if this is community property (see		
		instructions)		
į		Who has an interest in the property? Check one.	Do not deduct secured cla	A claims on achequie P.
	Make:	Debtor 1 only	Creditors Who Have Clair	ns Secured by Property.
	Model:	Debtor 2 only	Current value of the	
	Year:	— □ Debtor 1 and Debtor 2 only	entire property?	portion you own?
	Approximate mileage:	At least one of the debtors and another	•	
			\$	\$
	Other information:	☐ Check if this is community property (see	Ψ	
		instructions)		
] Y	/es	4.00	- Latert appured	claims or exemptions. Put
	Make:	Who has an interest in the property? Check one.		red claims on achequie v.
4.1.		☐ Debtor 1 only	Creditors Who Have Cl	aims Secured by Property.
	Model:	Debtor 2 only	Current value of th	e Current value of th
	Year:	Debtor 1 and Debtor 2 only	entire property?	a Corrent value of G
	Other information:			portion you own?
		☐ At least one of the debtors and another		portion you own?
		☐ At least one of the debtors and allowers ☐ Check if this is community property (see instructions)	\$	portion you own?
	as hove more than one lis	Check if this is community property (see instructions)	¥	portion you own?
lf y	ou own or have more than one, lis	Check if this is community property (see instructions)	Do not deduct secure	portion you own? \$d claims or exemptions. Pul
lf y	Malan	Check if this is community property (see instructions) If here: Who has an interest in the property? Check one	Do not deduct secure	portion you own? \$d claims or exemptions. Put
·	Malan	Check if this is community property (see instructions) If here: Who has an interest in the property? Check one	Do not deduct secured the amount of any secured Creditors Who Have (portion you own? \$d claims or exemptions. Put cured claims on Schedule Eclaims Secured by Property the Current value of the course of th
·		Check if this is community property (see instructions) St here: Who has an interest in the property? Check one Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only	Do not deduct secure	portion you own? \$d claims or exemptions. Put cured claims on Schedule Eclaims Secured by Property the Current value of the course of th
·	2. Make: Model: Year:	Check if this is community property (see instructions) If here: Who has an interest in the property? Check one Debtor 1 only Debtor 2 only	Do not deduct secured the amount of any secureditors Who Have Courrent value of t	portion you own? \$d claims or exemptions. Put cured claims on Schedule Eclaims Secured by Property the Current value of the course of th
·	2. Make: Model:	Check if this is community property (see instructions) St here: Who has an interest in the property? Check one Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another	Do not deduct secured the amount of any secureditors Who Have Courrent value of t	portion you own? \$d claims or exemptions. Put cured claims on Schedule Eclaims Secured by Property the Current value of the course of th
•	2. Make: Model: Year:	Check if this is community property (see instructions) Who has an interest in the property? Check one Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this is community property (see	Do not deduct secures the amount of any sec Creditors Who Have C Current value of t entire property?	portion you own? \$ d claims or exemptions. Put bured claims on Schedule D Claims Secured by Property he Current value of t portion you own?
•	2. Make: Model: Year:	Check if this is community property (see instructions) St here: Who has an interest in the property? Check one Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another	Do not deduct secures the amount of any sec Creditors Who Have C Current value of t entire property?	portion you own? \$ d claims or exemptions. Put bured claims on Schedule D Claims Secured by Property he Current value of t portion you own?
•	2. Make: Model: Year:	Check if this is community property (see instructions) Who has an interest in the property? Check one Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this is community property (see	Do not deduct secure: the amount of any sec Creditors Who Have (Current value of t entire property?	portion you own? \$ d claims or exemptions. Put bured claims on Schedule D Claims Secured by Property he Current value of t portion you own?
·	2. Make: Model: Year:	Check if this is community property (see instructions) Who has an interest in the property? Check one Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this is community property (see	Do not deduct secure: the amount of any sec Creditors Who Have (Current value of t entire property?	portion you own? \$ d claims or exemptions. Put bured claims on Schedule D Claims Secured by Property he Current value of t portion you own?

Case 19-42048 Doc 1 Filed 07/08/19 Entered 07/08/19 15:15:07 Desc Main Document Page 17 of 118

Debtor 1 Brandon Allen Blaisdell Case number (if known)______

Part 3: Describe Your Personal and Household Items

Do you own or have any legal or equitable interest in any of the following items?

Current value of the portion you own?
Do not deduct secured claims

	or exemptions.
Household goods and furnishings	
Examples: Major appliances, furniture, linens, china, kitchenware	land \$ 5,160.00
☐ No ☐ Yes. Describe mircofiber sectional,bombay chest, table and 4 chairs,toaster, kitchen is 2 bar stool kitchen aid mixer, Instant pot, woodbench, woodmetal end	nanu, s
7. Electronics Examples: Televisions and radios; audio, video, stereo, and digital equipment; computers, printers, scanners; music collections; electronic devices including cell phones, cameras, media players, games	
☐ No ☐ Yes. Describe	\$3,680.00
8. Collectibles of value Examples: Antiques and figurines; paintings, prints, or other artwork; books, pictures, or other art objects; Examples: Antiques and figurines; paintings, prints, or other artwork; books, pictures, or other art objects; stamp, coin, or baseball card collections; other collections, memorabilia, collectibles	
□ No ☑ Yes, Describe 3 African Masks	\$150.00
 Equipment for sports and hobbies Examples: Sports, photographic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; canoes and kayaks; carpentry tools; musical instruments 	The state of the s
☐ No ☐ Yes. Describe Total gym, Husky toolbox. Craftsman Snowblower, Husqvarne riding [awnmower_tools, Pro-form_elliptical, advance 600 treadmill, UFC Boxi	\$\$
Examples: Pistols, rifles, shotguns, ammunition, and related equipment No Yes. Describe Stevens 12 gauge Shotgun, Tauras PT111 GEn 2 <illenium 9mm<="" td=""><td>\$\$</td></illenium>	\$\$
VI Yes, Describe Stevento 12 31-31	
11. Clothes Examples: Everyday clothes, furs, leather coats, designer wear, shoes, accessories	2,925.00
No Military Dress Uniforms. Brandon Blaisdell Clothes, Tonya Blaisdel Clothes , Mora Lee Wedding Dress	\$
12. Jewelry Examples: Everyday jewelry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems, gold, silver	
☐ No ☑ Yes. Describe Wedding Bandset [Gold and Diamond, Mens Weeding Band	\$420.00
13. Non-farm animals Examples: Dogs, cats, birds, horses	400.00
☐ No ☐ Yes. Describe	\$100.00
14. Any other personal and household items you did not already list, including any health aids you did not list	•
☐ No ☐ Yes. Give specific ☐ The Property of Machine Primo water cooler, stainless steel	2 075 00
information CPAP Dreamstation Wachine, 1 miles was	\$ 17,705.00

Case 19-42048 Doc 1 Filed 07/08/19 Entered 07/08/19 15:15:07 Desc Main Page 18 of 118 Document

Case number (if known)_ Blaisdell Allen Brandon Debtor 1 Middle Name **Describe Your Financial Assets** Current value of the Part 4: Do you own or have any legal or equitable interest in any of the following? portion you own? Do not deduct secured claims or exemptions. Examples: Money you have in your wallet, in your home, in a safe deposit box, and on hand when you file your petition 16. Çash 200.00 Examples: Checking, savings, or other financial accounts; certificates of deposit; shares in credit unions, brokerage houses, 17. Deposits of money and other similar institutions. If you have multiple accounts with the same institution, list each. ☐ No Institution name: **2** Yes..... Capital one 360 online checking account 17.1. Checking account: 17.2. Checking account: 17.3. Savings account 17.4. Savings account: 17.5. Certificates of deposit: 17.6. Other financial account: 17.7. Other financial account: 17.8. Other financial account: 17.9. Other financial account: 18. Bonds, mutual funds, or publicly traded stocks Examples: Bond funds, investment accounts with brokerage firms, money market accounts Z No Institution or issuer name: 0.00

☐ Yes..... 0.00 0.00

19. Non-publicly traded stock and interests in incorporated and unincorporated businesses, including an interest in an LLC, partnership, and joint venture % of ownership: 0.00 Name of entity: 0% **Ø** No 0.00 Yes. Give specific 0% information about 0.00 0% them.....

Case 19-42048 Doc 1 Filed 07/08/19 Entered 07/08/19 15:15:07 Desc Main Document Page 19 of 118

ebtor 1	Brandon	Allen	Blaisdell	Case number (if known)		
	First Name	Middle Name Last N	ame			i
			non nonetiah	le instruments		
Govern	ment and corpor	rate bonds and other	negotiable and non-negotiable, cashiers' checks, promissory to transfer to someone by signir	notes, and money orders.		
Negotia Non-ne	able instruments in gotiable instrumer	nts are those you cann	i, cashiers' checks, promissory of transfer to someone by significations.	ng or delivering them.		
☑ No						
☐ Yes	s. Give specific	Issuer name:			\$	0.00
	rmation about				\$	
					\$	
				tud as profit 6	haring plans	
		RA, ERISA, Keogh, 40	1(k), 403(b), thrift savings acco	unts, or other pension or profit-s	num g F	
Ø No □ Ye	es. List each	To a of consulati	Institution name:			0.00
ac	ccount separately.				\$ <u></u>	0.00
		401(k) or similar plan:			\$	0.00
		Pension plan:			\$	
		IRA:			ς.	0.00
		Retirement account:			\$	0.00
		Keogh:			 \$	0.00
		Additional account:				0.00
		Madition			\$	0.00
		Additional account:			\$	0.00
Exa	c urity deposits an or share of all unus omples: Agreemer onpanies, or others No	Additional account: and prepayments sed deposits you have nts with landlords, prep	made so that you may continue ald rent, public utilities (electric,	e service or use from a company , gas, water), telecommunication	\$	
Exa con	amples: Agreemer npanies, or others	Additional account: nd prepayments sed deposits you have nts with landlords, prep	made so that you may continue aid rent, public utilities (electric, Institution name or individual:	o contice or use from a company	\$	540.0
Exa con	amples: Agreemer npanies, or others No	Additional account: ad prepayments sed deposits you have nts with landlords, prep	made so that you may continue ald rent, public utilities (electric,	o contice or use from a company	\$ ns	540.0 0.0
Exa con	amples: Agreemer npanies, or others No	Additional account: ad prepayments sed deposits you have nts with landlords, prep Electric: Gas:	made so that you may continue ald rent, public utilities (electric, Institution name or individual: East Centra Energy	e service or use from a company , gas, water), telecommunication	\$\$ 	540.0 0.0 0.0
Exa con	amples: Agreemer npanies, or others No	Additional account: ad prepayments sed deposits you have nts with landlords, prep Electric: Gas:	made so that you may continue ald rent, public utilities (electric, Institution name or individual: East Centra Energy	e service or use from a company , gas, water), telecommunication and lord)	\$\$\$\$\$\$\$	540.0 0.0 0.0 500.0
Exa con	amples: Agreemer npanies, or others No	Additional account: Ind prepayments Seed deposits you have Ints with landlords, prep Ints Ints Ints Ints Ints Ints Ints Ints	made so that you may continue aid rent, public utilities (electric, Institution name or individual: East Centra Energy rental unit: Mike Double (last month rent	e service or use from a company , gas, water), telecommunication and lord)	\$\$\$\$\$\$\$	540.0 0.0 0.0 500.0 1,250.0
Exa con	amples: Agreemer npanies, or others No	Additional account: Ind prepayments sed deposits you have this with landlords, prepaid. Electric: Gas: Heating oil: Security deposit or Prepaid rent:	made so that you may continue ald rent, public utilities (electric, Institution name or individual: East Centra Energy Trental unit: Mike Double (last month rent	e service or use from a company , gas, water), telecommunication and lord)	\$\$\$\$\$\$\$\$	540.0 0.0 0.0 500.0 1,250.0
Exa con	amples: Agreemer npanies, or others No	Additional account: ad prepayments sed deposits you have nts with landlords, prep Electric: Gas: Heating oil: Security deposit or Prepald rent: Telephone:	made so that you may continue aid rent, public utilities (electric, Institution name or individual: East Centra Energy rental unit: Mike Double (last month rent Century link City of Braham	e service or use from a company , gas, water), telecommunication and lord)	\$\$\$\$\$\$\$	540.0 0.0 0.0 500.0 1,250.0 0.0
Exa con	amples: Agreemer npanies, or others No	Additional account: Ind prepayments sed deposits you have this with landlords, prepaid. Electric: Gas: Heating oil: Security deposit or Prepaid rent:	made so that you may continue aid rent, public utilities (electric, Institution name or individual: East Centra Energy Trental unit: Mike Double (la last month rent Century link City of Braham	e service or use from a company , gas, water), telecommunication and lord)	\$\$\$\$\$\$\$	540.0 0.0 0.0 500.0 1,250.0 0.0
Exa con	amples: Agreemer npanies, or others No	Additional account: and prepayments sed deposits you have nts with landlords, prep Electric: Gas: Heating oil: Security deposit or Prepaid rent: Telephone: Water:	made so that you may continue aid rent, public utilities (electric, Institution name or individual: East Centra Energy Trental unit: Mike Double (la last month rent Century link City of Braham	e service or use from a company , gas, water), telecommunication and lord)	\$\$\$\$\$\$\$	540.0 0.0 0.0 500.0 1,250.0 0.0
Execon Con Con Con Con Con Con Con Con Con C	amples: Agreemer npanies, or others No Yes	Additional account: Ind prepayments Seed deposits you have Ints with landlords, prepayments Electric: Gas: Heating oil: Security deposit or Prepaid rent: Telephone: Water: Rented furniture: Other:	made so that you may continue ald rent, public utilities (electric, Institution name or individual: East Centra Energy Trental unit: Mike Double (later than 1 and 1 a	e service or use from a company gas, water), telecommunication	\$\$\$\$\$\$\$	540.0 0.0 500.0 1,250.0 0.0
Execon value	amples: Agreemer npanies, or others No Yes	Additional account: Ind prepayments Seed deposits you have Ints with landlords, prepayments Electric: Gas: Heating oil: Security deposit or Prepaid rent: Telephone: Water: Rented furniture: Other:	made so that you may continue aid rent, public utilities (electric, Institution name or individual: East Centra Energy Trental unit: Mike Double (la last month rent Century link City of Braham	e service or use from a company gas, water), telecommunication	\$\$\$\$\$\$\$	540.0 0.0 0.0 500.0 1,250.0 0.0
Example Control of the Control of th	amples: Agreemer npanies, or others No Yes Annuities (A contr	Additional account: Ind prepayments Seed deposits you have Ints with landlords, prepaid Electric: Gas: Heating oil: Security deposit or Prepaid rent: Telephone: Water: Rented furniture: Other:	made so that you may continue aid rent, public utilities (electric, Institution name or individual: East Centra Energy Trental unit: Mike Double (la last month rent Century link City of Braham ment of money to you, either for	e service or use from a company gas, water), telecommunication	\$\$\$\$\$\$\$	540.00 0.00 500.00 1,250.00 0.00
Execon Con Z	amples: Agreemer npanies, or others No Yes	Additional account: Ind prepayments Seed deposits you have Ints with landlords, prepaid Electric: Gas: Heating oil: Security deposit or Prepaid rent: Telephone: Water: Rented furniture: Other:	made so that you may continue aid rent, public utilities (electric, Institution name or individual: East Centra Energy Trental unit: Mike Double (la last month rent Century link City of Braham ment of money to you, either for	e service or use from a company gas, water), telecommunication	\$\$\$\$\$\$\$\$\$	540.0 0.0 0.0 500.0 1,250.0 0.0

Case 19-42048 Doc 1 Filed 07/08/19 Entered 07/08/19 15:15:07 Desc Main Document Page 20 of 118

ebtor 1	Brandon	Allen Name Last Name	Blaisdell	Case number (if known)	
	First Name Middle	Hamo			
	anducation IR	Δ in an account in a (qualified ABLE program	or under a qualified state tuition program.	
Interest 26 U.S.	.C. §§ 530(b)(1), 529A	(b), and 529(b)(1).			
🗹 No			Congretely fi	e the records of any interests.11 U.S.C. § 521(c):
☐ Yes	S	Institution name and	description. Separatory		\$
					\$
					\$
5. Trusts	s, equitable or future isable for your benef	1.4		ed in line 1), and rights or powers	
Z No					0.00
□ Y4	es. Give specific				\$
	formation about them.	The same of the sa			
26. Pater Exan	nts, copyrights, trade	e marks, trade secrets, names, websites, proc	, and other intellectual p eeds from royalties and li	roperty censing agreements	
Ø N					\$0.00
☐ Y ii	/es. Give specific nformation about them	1			4
Exai	mples: Building permit	d other general intang s, exclusive licenses, c	gibles ooperative association ho	ldings, liquor licenses, professional licenses	
Z 1 1	No Yes. Give specific	and the second s	and the second of the second o		\$
L	information about ther	m	Comment of the Commen		
		1.10000			Current value of the
Money	or property owed to	you?			portion you own? Do not deduct secured claims or exemptions.
					Do not deduct secured claims or exemptions.
28. Ta x	x refunds owed to yo	nu .		Federal:	Do not deduct secured claims or exemptions. 7,785.00
28. Ta x	x refunds owed to yo	formation Loi	nt Tax Refund	Federal: State:	Do not deduct secured claims or exemptions. \$ 7,785.00 \$ 1,797.00
28. Ta x	x refunds owed to yo No Yes. Give specific int about them, inc	formation Iluding whether d the returns	nt Tax Refund		Do not deduct secured claims or exemptions. 7,785.00
28. Ta x	x refunds owed to yo No Yes. Give specific int about them, inc	formation Joi	nt Tax Refund	State:	Do not deduct secured claims or exemptions. \$ 7,785.00 \$ 1,797.00
28. Ta x	x refunds owed to yo No Yes. Give specific int about them, inc you already file and the tax yea	formation Joi luding whether d the returns		State: Local:	\$ 7,785.00 \$ 1,797.00 \$ 0.00
28.Tax	x refunds owed to yo No Yes. Give specific int about them, inc you already file and the tax yea	formation Joi luding whether d the returns		State:	\$ 7,785.00 \$ 1,797.00 \$ 0.00
28. Tax 21 21 29. Fa	x refunds owed to you No Yes. Give specific into about them, inco you already file and the tax year amily support examples: Past due or	formation Join luding whether did the returns ars		State: Local: t, maintenance, divorce settlement, property set	\$ 7,785.00 \$ 1,797.00 \$ 0.00
28. Tax 21 21 29. Fa	x refunds owed to yo No Yes. Give specific int about them, inc you already file and the tax yea amily support ixamples: Past due or	formation Join luding whether did the returns ars		State: Local:	\$
28. Tax 21 21 29. Fa	x refunds owed to you No Yes. Give specific into about them, inco you already file and the tax year amily support examples: Past due or	formation Join luding whether did the returns ars		State: Local: t, maintenance, divorce settlement, property set	\$
28. Tax 21 21 29. Fa	x refunds owed to you No Yes. Give specific into about them, inco you already file and the tax year amily support examples: Past due or	formation Join luding whether did the returns ars		State: Local: t, maintenance, divorce settlement, property set Alimony: Maintenance:	\$ 7,785.00 \$ 1,797.00 \$ 0.00 selement \$ 0.00 \$ 0.00 \$ 0.00
28. Tax 21 21 29. Fa	x refunds owed to you No Yes. Give specific into about them, inco you already file and the tax year amily support examples: Past due or	formation Join luding whether did the returns ars		State: Local: t, maintenance, divorce settlement, property set Alimony: Maintenance: Support:	\$ 7,785.00 \$ 1,797.00 \$ 0.00 s 0.00 s 0.00 the s 0.00 s 0.00 s 0.00
28. Tax	x refunds owed to you No Yes. Give specific into about them, inco you already file and the tax year amily support examples: Past due or incompany the second incompany the second incompany that is a second incompany to the second incompany that is a second incompany to the second incompany that is a second incompany	formation cluding whether d the returns ars	usal support, child suppor	State: Local: t, maintenance, divorce settlement, property set Alimony: Maintenance: Support: Divorce settleme Property settleme	\$ 7,785.00 \$ 1,797.00 \$ 0.00 selement \$ 0.00 \$ 0.00 \$ 0.00 \$ 0.00 \$ 0.00 \$ 0.00
28. Tax	x refunds owed to you No Yes. Give specific into about them, inco you already file and the tax year amily support examples: Past due or incompany the second incompany the second incompany that is a second incompany to the second incompany that is a second incompany to the second incompany that is a second incompany	formation cluding whether d the returns ars	usal support, child suppo	State: Local: t, maintenance, divorce settlement, property set Alimony: Maintenance: Support: Divorce settleme Property settleme	\$ 7,785.00 \$ 1,797.00 \$ 0.00 selement \$ 0.00 \$ 0.00 \$ 0.00 \$ 0.00 \$ 0.00 \$ 0.00

Case 19-42048 Doc 1 Filed 07/08/19 Entered 07/08/19 15:15:07 Desc Main Document Page 21 of 118

Debtor 1	Brandon	Allen	Blaisdell	Case number (# known)	·	
	First Name Middle Na	ame Last Name				
1. Intere	sts in insurance policie	es - life insurance; health s	avings account (HSA); cr	edit, homeowner's, or renter's insurance	3	
☐ No	0			Beneficiary:	Surrender or refund value	ie:
☐ Ye	es. Name the insurance of each policy and list	company Company r t its value	name:		s0.t	00_
					\$	
	interest in property that u are the beneficiary of a erty because someone ha	as died.		e policy, or are currently entitled to recei	ve	
Z N	No	Frank (American American Spiriter) and a first			\$0	.00
	Yes. Give specific informa		The second secon			
aa Clai	ms against third parties	s, whether or not you l	have filed a lawsuit or m	nade a demand for payment		
Exa	mples: Accidents, employ	yment disputes, insuran			and the state of t	
	No Yes. Describe each clain	n			\$	0.00
	Tea. Dooding Comme		ny nature, including cov	nterclaims of the debtor and rights		
34. Oth	er contingent and unliq set off claims	luidated claims of ever	Ty flucture, message		and the state of t	
Ø					\$	0.00
u	Yes. Describe each clair		or a second of the second of t			
35. An	y financial assets you c	iid not already list		process from the company of the comp	10 (a)	0.00
	No Yes. Give specific infor	mation			\$	0.00
1_1	res. Give appoint amon	()			40.00	72.00
			new 4 including any en	tries for pages you have attached	12,0	
	dd the dollar value of al	I of your entries from	Part 4, moraums with	***************************************	→ \\\$12,0	2.00
	dd the dollar value of al or Part 4. Write that num	II of your entries from the there is the second sec	Part 4, mondaing 4.7	(100 101 Page 7)	7	2.00
	or Part 4. Write that num	IDEL HELE			······································	
36. A 0	or Part 4. Write that num	IDEL HELE			······································	
36. Ac fo	or Part 4. Write that num	y Business-Relate	ed Property You O	wn or Have an Interest In. Li	······································	
36. Ac fo	or Part 4. Write that num	y Business-Relate		wn or Have an Interest In. Li	······································	
36. A0 fo	Describe Anyon or have any	y Business-Relate	ed Property You O	wn or Have an Interest In. Li	······································	art 1.
36. Ac fo	Describe And Descr	y Business-Relate	ed Property You O	wn or Have an Interest In. Li	st any real estate in P Current value of portion you own Do not deduct secur	art 1.
36. Ac fo	Describe An No. Go to Part 6.	y Business-Relate	ed Property You O	wn or Have an Interest In. Li	st any real estate in P Current value of portion you own Do not deduct secur	art 1. the ? ed claims
36. Ac fo	Describe And Descr	y Business-Relate	ed Property You O	wn or Have an Interest In. Li	st any real estate in P Current value of portion you own Do not deduct secur	art 1.
36. Ac fo	Describe Any O you own or have any No. Go to Part 6. Yes. Go to line 38. Accounts receivable or No Yes. Describe	y Business-Relate legal or equitable inte	ed Property You O	wn or Have an Interest In. Li	Current value of portion you own Do not deduct secur or exemptions.	art 1. the ? ed claims
36. Ac fo	Describe Any O you own or have any No. Go to Part 6. Yes. Go to line 38. Accounts receivable or No Yes. Describe	y Business-Relate legal or equitable inte	ed Property You O	wn or Have an Interest In. Li	Current value of portion you own Do not deduct secur or exemptions.	art 1. the ? ed claims
36. Ac fo	Describe Any O you own or have any No. Go to Part 6. Yes. Go to line 38. Accounts receivable or No Yes. Describe	y Business-Relate legal or equitable inte	ed Property You O	wn or Have an Interest In. Li	Current value of portion you own Do not deduct secur or exemptions.	art 1. the ? ed claims

Case 19-42048 Doc 1 Filed 07/08/19 Entered 07/08/19 15:15:07 Desc Main Document Page 22 of 118

Acchinery, fixtures, equipment, supplies you use in business, and tools of your trade No	Brandon	Allen	Blaisdell	Case number (if known)	
No Yes, Describe	First Name Middle N	Adule			
No Yes, Describe	Machinery flytures, equipmo	ent, supplies you use	in business, and tools of	your trade	
Ves. Describe			and the second section of the second section s	\$	0.00
Interests in partnerships or joint ventures				ŧ	
Yes_Describe		and the first control of the state of the st	and the second s		
Yes_Describe	Inventory				0.00
interests in partnorehips or joint ventures No Yes. Describe Name of entity:	☑ No				
No	Yes. Describe				
No		r joint ventures			
Yes. Describe Name of entity: S S S S		•		% of ownership:	- 00
3. Customer lists, mailing lists, or other compilations No		ne of entity:		0/6	
3. Customer lists, mailing lists, or other compilations No				%	<u> </u>
No Yes. Do your lists include personally Identifiable information (as defined in 11 U.S.C. § 101(41/k))? No No Yes. Describe				%	5
No Yes. Do your lists include personally Identifiable information (as defined in 11 U.S.C. § 101(41/k))? No No Yes. Describe					
No	3. Customer lists, mailing lis	sts, or other compilat	ions		
No	No	lude personally ident	ifiable information (as def	ined in 11 U.S.C. § 101(41A))?	
Yes. Describe		inno beserving			0.00
44. Any business-related property you did not already list No Yes. Give specific					\$
✓ No Yes. Give specific information			and the second s		
 No Yes. Give specific information	Any husiness-related pro	operty you did not all	ready list		0.00
45. Add the dollar value of all of your entries from Part 5, including any entries for pages you have attached for Part 5. Write that number here Describe Any Farm- and Commercial Fishing-Related Property You Own or Have an Interest In. If you own or have an interest in farmland, list it in Part 1. 46. Do you own or have any legal or equitable interest in any farm- or commercial fishing-related property? No. Go to Part 7. Yes. Go to line 47. Current value of the portion you own? Do not deduct secured clair or exemptions.	₩ No				\$
45. Add the dollar value of all of your entries from Part 5, including any entries for pages you have attached for Part 5. Write that number here Describe Any Farm- and Commercial Fishing-Related Property You Own or Have an Interest In. If you own or have an interest in farmland, list it in Part 1. 46. Do you own or have any legal or equitable interest in any farm- or commercial fishing-related property? 1					\$
45. Add the dollar value of all of your entries from Part 5, including any entries for pages you have attached for Part 5. Write that number here Part 6: Describe Any Farm- and Commercial Fishing-Related Property You Own or Have an Interest in. If you own or have an interest in farmland, list it in Part 1. 46. Do you own or have any legal or equitable interest in any farm- or commercial fishing-related property? No. Go to Part 7. Yes. Go to line 47. Current value of the portion you own? Do not deduct secured clair or exemptions.	mormanon man				\$
45. Add the dollar value of all of your entries from Part 5, including any entries for pages you have attached for Part 5. Write that number here Part 6: Describe Any Farm- and Commercial Fishing-Related Property You Own or Have an Interest in. If you own or have an interest in farmland, list it in Part 1. 46. Do you own or have any legal or equitable interest in any farm- or commercial fishing-related property? No. Go to Part 7. Yes. Go to line 47. Current value of the portion you own? Do not deduct secured clair or exemptions.	_				\$
45. Add the dollar value of all of your entries from Part 5, including any entries for pages you have attached for Part 5. Write that number here Part 6: Describe Any Farm- and Commercial Fishing-Related Property You Own or Have an Interest in. If you own or have an interest in farmland, list it in Part 1. 46. Do you own or have any legal or equitable interest in any farm- or commercial fishing-related property? No. Go to Part 7. Yes. Go to line 47. Current value of the portion you own? Do not deduct secured clair or exemptions.	-				\$
45. Add the dollar value of all of your entries from Part 5, including any entries for pages you have attached for Part 5. Write that number here	-				\$
Part 6: Describe Any Farm- and Commercial Fishing-Related Property You Own or Have an Interest In. 146. Do you own or have any legal or equitable interest in any farm- or commercial fishing-related property? No. Go to Part 7. Yes. Go to line 47. Current value of the portion you own? Do not deduct secured clair or exemptions.	-			to a regard you have attached	0.00
Part 6: Describe Any Farm- and Commercial Fishing-Related Property You Own or Have an Interest In. If you own or have an interest in farmland, list it in Part 1. 46. Do you own or have any legal or equitable interest in any farm- or commercial fishing-related property? No. Go to Part 7. Yes. Go to line 47. Current value of the portion you own? Do not deduct secured clair or exemptions.	45 Add the dollar value of	all of your entries fr	om Part 5, including any e	entries for pages you have a series	Ψ
If you own or have all interest in any farm- or commercial fishing-related property? 46. Do you own or have any legal or equitable interest in any farm- or commercial fishing-related property? All No. Go to Part 7. Yes. Go to line 47. Current value of the portion you own? Do not deduct secured clair or exemptions. 47. Farm animals Examples: Livestock, poultry, farm-raised fish No No Yes	for Part 5. Write that no	umber here			
If you own or have an intercest in any farm- or commercial fishing-related property? 46. Do you own or have any legal or equitable interest in any farm- or commercial fishing-related property? No. Go to Part 7. Yes. Go to line 47. Current value of the portion you own? Do not deduct secured clair or exemptions. 47. Farm animals Examples: Livestock, poultry, farm-raised fish No Yes				Have on Interest	In.
If you own or have all interest in any farm- or commercial fishing-related property? 46. Do you own or have any legal or equitable interest in any farm- or commercial fishing-related property? All No. Go to Part 7. Yes. Go to line 47. Current value of the portion you own? Do not deduct secured clair or exemptions. 47. Farm animals Examples: Livestock, poultry, farm-raised fish No No Yes	Describe An	y Farm- and Com	nercial Fishing-Related	d Property You Own or Have an interest	
 ✓ No. Go to Part 7. ✓ Yes. Go to line 47. Current value of the portion you own? Do not deduct secured clair or exemptions. 47. Farm animals Examples: Livestock, poultry, farm-raised fish No Yes \$0 	If you own or	nave all illustration			<u>-</u>
 ✓ No. Go to Part 7. ✓ Yes. Go to line 47. Current value of the portion you own? Do not deduct secured clair or exemptions. 47. Farm animals Examples: Livestock, poultry, farm-raised fish No Yes \$0 	1	ny logal or equitable	interest in any farm- or co	ommercial fishing-related property?	
Yes. Go to line 47. Current value of the portion you own? Do not deduct secured clair or exemptions. 47. Farm animals Examples: Livestock, poultry, farm-raised fish No Yes	46. Do you own or nave a	ny legal of oqui			
Do not deduct secured clair or exemptions. 47. Farm animals Examples: Livestock, poultry, farm-raised fish No Yes	Yes. Go to line 47.				Current value of the
47. Farm animals Examples: Livestock, poultry, farm-raised fish □ No □ Yes					Do not deduct secured clain
Examples: Livestock, poultry, farm-raised listi No Yes					or exemptions.
Examples: Livestock, poultry, farm-raised listi No Yes	. Form onimale				
, □ No □ Yes	47. Farm animals Examples: Livestock,	poultry, farm-raised fis	h		
\$					•
	☐ Yes			_	\$

Case 19-42048 Doc 1 Filed 07/08/19 Entered 07/08/19 15:15:07 Desc Main Document Page 23 of 118 Blaisdell

als, and feedrelated property you did not air	ools of trade	\$	0.00
ments, machinery, fixtures, and t als, and feed -related property you did not alro	ools of trade	\$	0.00
ments, machinery, fixtures, and t als, and feed -related property you did not alro	ools of trade	\$	0.00
ments, machinery, fixtures, and t	ools of trade	\$	
ments, machinery, fixtures, and t	ools of trade	\$	
als, and feed related property you did not airc		\$	
als, and feed related property you did not airc		\$	
als, and feed related property you did not airc		\$	0.00
als, and feedrelated property you did not air			0.00
related property you did not air			0.00
related property you did not air			0.00
-related property you did not air			0.00
	THE RESERVE THE PARTY OF THE PA		
	eady list		
			0.00
		\$_	
			0.00
- ontrine from Part 6, including a	t- made Voll nave didy!	eu → \$_	
e	ny entries for pages you have		
o membership			\$
			5
		garantees of the section of the sect	Φ
		, Γ	\$ 0.00
Part 7. Write that	number here		
our entries from Fact 1			
_		_	
f Each Part of this Form		_	0.00
		→	\$
***************************************	6 124 00		
	\$		
4	\$ 17,705.00		
usehold items, line 15	12.072.00		
	\$		
	\$ 0.00		
d property, line 45	0.00		
g-related property, line 52	\$		
	÷s 0.00		
not listed, line 54		and proporty total	+s 35,901.0
	\$35,901.00 Copy perso	onal property total 🔿	** Y
	and the same of th		35,901.0
d lines 56 through 61			
			\$\$
			\$
a uth	any kind you did not already list? who membership your entries from Part 7. Write that of Each Part of this Form ousehold items, line 15 s, line 36 ed property, line 45 ing-related property, line 52	any kind you did not already list? ub membership your entries from Part 7. Write that number here of Each Part of this Form 2	your entries from Part 7. Write that number here of Each Part of this Form 2

Fill in this information to identify your case:	Blaisdell	
Debtor 1 Brandon Allen First Name Middle Name Debtor 2 Draughon (Spouse, if filing) First Name Middle Name	Last Name Blaisdell Last Name	
United States Bankruptcy Court for the: District of Minnesota Case number		Check if this is an amended filing
(If known)		

Official Form 106C

Schedule C: The Property You Claim as Exempt

04/16

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on Schedule A/B: Property (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of Part 2: Additional Page as necessary. On the top of any additional pages, write

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

	Identify the Property You Claim as Exempt
Part 1:	Identity the Copy

. Which set of ex	the Property You Claim emptions are you claiming? (ming state and federal nonbank ming federal exemptions. 11 U	Check one only, even if y cruptcy exemptions. 11 U	our spouse is filing with you.	
			the bolow	
	to you list on Schedule A/B t	hat you claim as exem	pt, fill in the information below.	
فستسد و م	on of the property and line on	Current value of the portion you own	Amount of the exemption you claim	Specific laws that allow exemption
Schedule A/B	that lists this property	Copy the value from Schedule A/B	Check only one box for each exemption.	
Brief description:	2007 chrysler Pacifi.	\$ <u>2,673.00</u>	 ∑ \$ 2,673.00 100% of fair market value, up to any applicable statutory limit 	550.37 subd. 12(a) 11 U.S.C. § 522(b)(3)
Line from Schedule A/E	3: <u>3</u>			550.37 subd. 12(a)
Brief description:	2006 Ford Truck	\$ <u>3,451.00</u>	\$\frac{3,200.00}{100\% of fair market value, up to any applicable statutory limit	11 U.S.C. § 522(b)(3)
Line from Schedule A/	B: 3		✓ \$ 5,160.00	550.37 subd. (4)(b) 11 U.S.C. § 522(b)(3)
Brief description:	Household Goods	\$5,160.00	100% of fair market value, up to any applicable statutory limit	11 0.5.0. 9 022(0)(0)
Line from Schedule A				
(Subject to	niming a homestead exemption adjustment on 4/01/19 and ever	,, 0 , 0		nt.)
☑ No ☐ Yes. Di	d you acquire the property cove	ered by the exemption wi	thin 1,215 days before you filed this case?	•
☐ N	0			
☐ Y	5 5		Towards You Claim as Exempt	page 1 c

Case 19-42048 Doc 1 Filed 07/08/19 Entered 07/08/19 15:15:07 Desc Main Document Page 25 of 118

Blaisdell Case number (if known)_ Brandon First Name Allen Debtor 1 Last Name

rt 2: Additional	f the property and line	Current value of the	Amount of the exemption you claim	Specific laws that allow exemptio	
on Schedule A/B ti	hat lists this property	portion you own Copy the value from Schedule A/B	Check only one box for each exemption		
Brief E	lectronics	\$ 3,680.00	■ \$ 3,680.00 100% of fair market value, up to any applicable statutory limit	550.37 subd. (4)(b) 11 U.S.C. § 522(b)(3)	
Line from 7 Schedule A/B:		. = 0.00	450.00	11 U.S.C. § 522(b)(3)	
description:	ollectibles	\$150.00	150.00 100% of fair market value, up to any applicable statutory limit		
Line from 8 Schedule A/B:	3			11 U.S.C. § 522(b)(3)	
description:	Sport Equipment etc	\$2,775.00	2,775.00 100% of fair market value, up to any applicable statutory limit	11 0.0.0.	
Line from <u>Schedule A/B:</u>	9	420.0	(00.00	11 U.S.C. § 522(b)(3)	
description:	Firearms 10	\$420.0	100% of fair market value, up to any applicable statutory limit		
Schedule A/B: Brief	Clothes	\$2,925.0	00	550.37 subd. 4(a) 11 U.S.C. § 522(b)(3)	
description:	11		any applicable statutory limit		
Schedule A/B: Brief description:	Jewelry	. \$420.9	00	11 U.S.C. § 522(b)(3)	
Line from	12		any applicable statutory limit		
Schedule A/B: Brief	Non Farm Animals	<u> </u>	00	11 U.S.C. § 522(b)(3)	
description: Line from Schedule A/B:	13		any applicable statutory limit	11 U.S.C. § 522(b)(3)	
Brief description:	otherhouseholditems	s	.00 \$ 2,075.00 □ 100% of fair market value, up tany applicable statutory limit	0	
Line from Schedule A/B:	14	000		11 U.S.C. § 522(b)(3)	
Brief description:	Cash	\$200	.00 \$ 200.00 100% of fair market value, up any applicable statutory limit	to	
Line from Schedule A/B:	<u>16</u>	¢ 2,290	0.000.00	11 U.S.C. § 522(b)(3)	
Brief description: Line from	Security Deposit 22	\$	100% of fair market value, up any applicable statutory limit		
Schedule A/B Brief				11 U.S.C. § 522(b)(3)	
description: Line from Schedule A/E	28		■ 100% of fair market value, up any applicable statutory limit		
Brief description:		\$	□ \$ 100% of fair market value, u	o to	
Line from Schedule A/L	B:		any applicable statutory limit		

Case 19-42048 Doc 1 Filed 07/08/19 Entered 07/08/19 15:15:07 Desc Main Document Page 26 of 118

======================================	formation to ider	ntify your case:	
Debtor 1 Debtor 2 (Spouse, if filing)	Brandon First Name Tonya First Name	Allen Middle Name Draughon Middle Name	Blaisdell Last Name Blaisdell Last Name
United States E Case number (If known)		the: District of Minnesota	

Official Form 106D

Schedule D: Creditors Who Have Claims Secured by Property

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the Additional Page, fill it out, number the entries, and attach it to this form. On the top of any additional pages, write your name and case number (if known).

t 1: List All Secured Claims				A-1
ist all secured claims. If a creditor has mo	ore than one secured claim, list the creditor separately s a particular claim, list the other creditors in Part 2. betical order according to the creditor's name.	Column A Amount of claim Do not deduct the value of collateral.	Column B Value of collateral that supports this claim	Column C Unsecured portion If any
your made the property of the	Describe the property that secures the claim:	\$	\$	\$
Creditor's Name				
Number Street City State ZIP Code	As of the date you file, the claim is: Check all that apply Contingent Unliquidated Disputed			
Who owes the debt? Check one.	Nature of lien. Check all that apply.			
☐ Debtor 1 only ☐ Debtor 2 only ☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another ☐ Check if this claim relates to a	 An agreement you made (such as mortgage or secured car loan) Statutory lien (such as tax lien, mechanic's lien) Judgment lien from a lawsuit Other (including a right to offset) 	_		
community debt	Last 4 digits of account number	- Starkform of Miller, worn track in the space of a stark and described a stark of described and	elektronister en sillinge et elektrike mystansk transferen propositiet i synstelek i sensatiet.	State of the man destroyers and page
Date debt was incurred2	Describe the property that secures the claim:	\$		\$
Creditor's Name				
Number Street	As of the date you file, the claim is: Check all that app Contingent Unliquidated	ly.		
City State ZIP Code	☐ Disputed			
Who owes the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim relates to a	Nature of Ilen. Check all that apply. An agreement you made (such as mortgage or secure car loan) Statutory lien (such as tax lien, mechanic's lien) Judgment lien from a lawsuit Other (including a right to offset)			
community debt Date debt was incurred	Last 4 digits of account number			and the second second of the second s

Case 19-42048 Doc 1 Filed 07/08/19 Entered 07/08/19 15:15:07 Desc Main Document Page 27 of 118

Brandon	Allen	Blaisdell	Case numb	er (if known)		
btor 1 First Name Middle Nan	ne Last	Name		Column A	Column B	Column C
Additional Page rt 1: After listing any entries by 2.4, and so forth.	s on this page	, number them beginning with 2.3, fol	lowed	Amount of claim Do not deduct the value of collateral.	Value of collateral that supports this claim	Unsecured portion If any
	De	scribe the property that secures the cla	im: \$		\$	\$
Creditor's Name						
Number Street						
	As	s of the date you file, the claim is: Check	all that apply.			
	, 🗆	Contingent				
City State		Unliquidated Disputed				
Who owes the debt? Check one.		ature of Ilen. Check all that apply.				
Debtor 1 only		An agreement you made (such as mortgag car loan)	e or secured			
Debtor 2 only Debtor 1 and Debtor 2 only		Statutory lien (such as tax lien, mechanic's	lien)			
At least one of the debtors and a	another	Judgment lien from a lawsuit				
☐ Check if this claim relates to	L	Other (including a right to offset)		•		
community debt						
Date debt was incurred	L	ast 4 digits of account number		especial comment conserve states to conserve states and security of the securi	$0.015 \pm 0.000 \pm 0.000$	
NOTES AND A STATE CONTRACTOR CONTRACTOR CONTRACTOR AND	_ [Describe the property that secures the c	laim:	\$	\$	_\$
Creditor's Name						
Number Street		L. L. Ohan	to all that apply	_		
		As of the date you file, the claim is: Chec	K all friat apply.			
		Unliquidated				
City State		☐ Disputed				
Who owes the debt? Check one.		Nature of lien. Check all that apply.				
☐ Debtor 1 only		An agreement you made (such as mortge	ige or secured			
Debtor 2 only Debtor 1 and Debtor 2 only		car loan) Statutory lien (such as tax lien, mechanic	's lien)			
At least one of the debtors and		Judgment lien from a lawsuit				
Check if this claim relates community debt		Other (including a right to offset)				
Date debt was incurred		Last 4 digits of account number	in commonwhich was a side of the effect of t	ration was always by a factor of several contract and con	$d_{k}(x) = \sup_{x \in \mathbb{R}^{N}} d_{k}(x) + \sum_{x \in \mathbb{R}^{N}} $	Andrews and the second
The extractive of the state of the extractive of the extractive of the state of the extractive of the		Describe the property that secures the	claim:	\$	\$	\$
Creditor's Name						
Number Street						
		As of the date you file, the claim is: Che	eck all that appl	y.		
		☐ Contingent ☐ Unliquidated				
City Stat	te ZIP Code	Disputed				
Who owes the debt? Check on	ie.	Nature of Ilen. Check all that apply.				
Debtor 1 only		An agreement you made (such as morte car loan)	gage or secure	ı		
Debtor 2 only		Statutory lien (such as tax lien, mechan	ic's lien)			
Debtor 1 and Debtor 2 onlyAt least one of the debtors ar	nd another	Judgment lien from a lawsuit				
Check if this claim relates		Other (including a right to offset)				
community debt Date debt was incurred		Last 4 digits of account number			AND REAL PROPERTY OF THE PROPE	
Add the dellar value	of your entries	s in Column A on this page. Write tha	t number hei	re: _{\$}		
Add the dollar value	a of vour form	, add the dollar value totals from all p	ages.	s		
Write that number he	ere:					

Case 19-42048 Doc 1 Filed 07/08/19 Entered 07/08/19 15:15:07 Desc Main Document Page 28 of 118

Blaisdell Allen Case number (# known) Brandon Debtor 1 List Others to Be Notified for a Debt That You Already Listed Part 2: Use this page only if you have others to be notified about your bankruptcy for a debt that you already listed in Part 1. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the creditor in Part 1, and then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Part 1, list the additional creditors here. If you do not have additional persons to be notified for any debts in Part 1, do not fill out or submit this page. On which line in Part 1 did you enter the creditor? ____ Last 4 digits of account number ___ __ __ Name Number Street ZIP Code State City On which line in Part 1 did you enter the creditor? ___ Last 4 digits of account number ___ __ __ Name Number ZIP Code State City On which line in Part 1 did you enter the creditor? ___ Last 4 digits of account number ____ Name Number ZIP Code State City On which line in Part 1 did you enter the creditor? ____ Last 4 digits of account number ___ __ __ Name Street Number State ZIP Code City On which line in Part 1 did you enter the creditor? ___ Last 4 digits of account number ____ Name Street Number State ZIP Code City On which line in Part 1 did you enter the creditor? _ Last 4 digits of account number ____ _ Name Number Street ZIP Code State City

United States Bankruptcy Court District of Minnesota

In re: Brandon Allan Blaisdell and

Case No.

Tonya Draughon Blaisdell

Debtor

Chapter 7

DISCLOSURE OF COMPENSATION OF BANKRUPTCY PETITION PREPARER[Must be filed with the petition if a bankruptcy petition preparer prepares the petition. 11 U.S.C. 110 (h)(2).]

1. Under 11 U.S.C. 110 (h) , I declare under penalty of perjury that I am not an attorney or employee of an attorney, that I prepared or caused to be prepared one or more documents filing by the above-named debtor(s) in connection with this bankruptcy case, and that compensation paid to me within one year before the filing of the bankruptcy petition, or agreed to be paid to me , for services rendered on behalf of the debtor(s) in contemplation of or in connection with the bankruptcy is as follows:

For document preparation services, I have agreed to accept	\$90.00
Prior to the filing of this statement I have received	\$ 90.00
Balance Due	\$0.00

- I have prepared or caused to be prepared the following documents and provided the following services: Amended Schedule I Amended Schedule J Amended Schedule EF, Summary of Your Assets, Schedule AB, Schedule C, Schedule D, Statement of your Currently Monthly Income, Chapter 7 Means test Calculation, Statement of Exemption from Presumption of Abuse under 707 (b)(2), Statement of Intention for Individual filing under Chapter 7
- 3. The source of the compensation paid to me was:

Debtor Brandon Allan Blaisdell and Tonya Draughon Blaisdell

- 4. The source of the compensation paid to me is:
 - Debtor Brandon Allan Blaisdell and Tonya Draughon Blaisdell
- 5. The foregoing is a complete statement of any agreement or arrangement for payment to me for preparation of the petition filed by the debtor(s) in this bankruptcy case.
- 6. To my knowledge no other person has prepared for compensation a document for filing about this bankruptcy case except as listed below

Name: Brandon Allan Blaisdell Social Security Number: XXX-XX-6373 and Tonya Draughon Blaisdell Social Security Number: XXX-XX-2239

David Adams

464-25-7787

Social Security Number of bankruptcy petition preparers

Date

David Adams if any of Bankruptcy Petition Preparer 2140 Maywood Drive Birmingham, Alabama 35214

* If the bankruptcy petition preparer is not an individual, state the Social Security number of the officer, principal responsible person or partner of the bankruptcy petition preparer. (Required by 11 U.S.C. 110)

A bankruptcy petition preparer's failure to comply with the provisions of title 11 and the Federal Rules of Bankruptcy Procedure may result in fines or imprisonment or both. 11 U.S.C. 110; 18 U.S.C. 156

Case 19-42048 Doc 1 Filed 07/08/19 Entered 07/08/19 15:15:07 Desc Main Document Page 31 of 118

Fill in this information to identify your case:				
Brandon Allan Blaisd	ell			
Debtor 1 First Name Middle Name	Last Name			
Debtor 2 (Spouse, if filing) First Name Middle Name	Last Name			
United States Bankruptcy Court for the: Distri	ct of			
				k if this is an ded filing
Case number(If known)			amen	ded ming
Official Form 106E/F				
Schedule E/F: Creditors W	no Have Unsecured Claim	ns		12/15
Be as complete and accurate as possible. Use Part List the other party to any executory contracts or un A/B: Property (Official Form 106A/B) and on Scheducreditors with partially secured claims that are listeneeded, copy the Part you need, fill it out, number that any additional pages, write your name and case number that the second case is the second case in the second case in the second case is the second case in the second case is the second case in the second case is the second case in the second case in the second case is the second case in the second case in the second case is the second case in the second case in the second case is the second case in the second case in the second case in the second case is the second case in the second case is the second case in the second case in the second case is the second case in the second case is the second case in the second case in the second case is the second case in the second case in the second case is the second case in the second case in the second case is the second case in the second case in the second case is the second case in the second case in the second case is the second case in the second case in the second case is the second case in the second case in the second case is the second case in the second case in the second case in the second case is the second case in the second case in the second case is the second case in the second case in the second c	1 for creditors with PRIORITY claims and Part 2 for nexpired leases that could result in a claim. Also lule G: Executory Contracts and Unexpired Leases d in Schedule D: Creditors Who Have Claims Secute entries in the boxes on the left. Attach the Commber (if known).	r creditors with ist executory co (Official Form 1	06G). Do not i	include any ce is
Part 1: List All of Your PRIORITY Unsecure	ed Claims			
1. Do any creditors have priority unsecured claim	s against you?			
No. Go to Part 2.				
Yes. 2. List all of your priority unsecured claims. If a cr	aditor has more than one priority unsecured claim, list	the creditor sepa	arately for eacl	n claim. For
each claim listed, identify what type of claim it is. it nonpriority amounts. As much as possible, list the upsecured claims, fill out the Continuation Page of	claims in alphabetical order according to the creditor's Part 1. If more than one creditor holds a particular cla	name If you have	ve more than t	wo priority
(For an explanation of each type of claim, see the	nstructions for this form in the instruction bookiet.)	Total claim	Priority	Nonpriority
			amount	amount
2.1	Last 4 digits of account number	\$	\$	\$
Priority Creditor's Name		•		
	When was the debt incurred?			
Number Street	As of the date you file, the claim is: Check all that ap	oply.		
	☐ Contingent			
City State ZIP Code	☐ Unliquidated			
Who incurred the debt? Check one.	☐ Disputed			
Debtor 1 only	Type of PRIORITY unsecured claim:			
☐ Debtor 2 only ☐ Debtor 1 and Debtor 2 only	☐ Domestic support obligations			
At least one of the debtors and another	☐ Taxes and certain other debts you owe the government	ent		
☐ Check if this claim is for a community debt	Claims for death or personal injury while you were			
Is the claim subject to offset?	intoxicated Other. Specify			
□ No				
Yes	Last 4 digits of account number			\$
2.2 Priority Creditor's Name	When was the debt incurred?			
	<u>.</u>			
Number Street	As of the date you file, the claim is: Check all that a	pply.		
	Contingent			
City State ZIP Code	Unliquidated			
Who incurred the debt? Check one.	☐ Disputed			
Debtor 1 only	Type of PRIORITY unsecured claim:			
Debtor 2 only	Domestic support obligations			
□ Debtor 1 and Debtor 2 only□ At least one of the debtors and another	Taxes and certain other debts you owe the government	nent		
☐ At least one of the debtors and another ☐ Check if this claim is for a community debt	Claims for death or personal injury while you were			
	intoxicated Other. Specify			
Is the claim subject to offset?	Outgr. Opcomy			

No Yes

Case 19-42048 Doc 1 Filed 07/08/19 Entered 07/08/19 15:15:07 Desc Main

Document Page 32 of 118 Blaisdell Case number (if known)_

Your PRIORITY Unsecured Claims -	peginning with 2.3, followed by 2.4, and so forth.	Total claim	Priority amount	Nonpriority amount
	Last 4 digits of account number	\$. \$	\$
riority Creditor's Name				
lumber Street	When was the debt incurred?			
quinde Geoot	As of the date you file, the claim is: Check all that apply.			
	☐ Contingent			
City State ZIP Code	☐ Unliquidated			
	☐ Disputed			
Who incurred the debt? Check one.	Type of PRIORITY unsecured claim:			
Debtor 1 only				
☐ Debtor 2 only ☐ Debtor 1 and Debtor 2 only	Domestic support obligationsTaxes and certain other debts you owe the government			
At least one of the debtors and another	Claims for death or personal injury while you were			
☐ Check if this claim is for a community debt	intoxicated			
G Prieck is this claim is for a comment,	Other. Specify			
Is the claim subject to offset?				
☐ No				
Yes		and the second	And the former of the feature of the state o	and the second s
According to Control of Control o	Last 4 digits of account number	\$	\$	\$
Priority Creditor's Name				
	When was the debt incurred?			
Number Street	As of the date you file, the claim is: Check all that apply	<i>'</i> .		
State ZIP Code	☐ Contingent ☐ Unliquidated			
City State ZIP Code	☐ Disputed			
Who incurred the debt? Check one.	and all-fine			
Debtor 1 only	Type of PRIORITY unsecured claim:			
Debtor 2 only	☐ Domestic support obligations			
Debtor 1 and Debtor 2 only	Taxes and certain other debts you owe the government			
At least one of the debtors and another	 Claims for death or personal injury while you were intoxicated 			
☐ Check if this claim is for a community debt	Other. Specify	_		
Is the claim subject to offset?				
_				
Yes		general personal primarile de la presidente de l'Albert	otes e contrato de la contrato de 1977.	
Total Andrews - Charles and Andrews - Charle	Last 4 digits of account number	\$	\$	\$
Priority Creditor's Name				
	When was the debt incurred?			
Number Street	As of the date you file, the claim is: Check all that app	ıly.		
State ZIP Code	☐ Contingent ☐ Unliquidated			
City State ZIP Code	☐ Disputed			
Who incurred the debt? Check one.				
Debtor 1 only	Type of PRIORITY unsecured claim:			
Debtor 2 only	Domestic support obligations	-4		
Debtor 1 and Debtor 2 only	Taxes and certain other debts you owe the governme	nt		
At least one of the debtors and another	 Claims for death or personal injury while you were intoxicated 	The service formation from the service of the court		
Check if this claim is for a community debt	Other. Specify			

Yes

Case 19-42048 Doc 1 Filed 07/08/19 Entered 07/08/19 15:15:07 Desc Main Document Page 33 of 118

	D=.
Debtor 1	Bra
LICOLO: I	

Brandon

Allan

Blaisdell Last Name Case number (if known)_

First Name Middle Name 2555 15115		
Part 2: List All of Your NONPRIORITY Unsecured Claims	;	
B. Do any creditors have nonpriority unsecured claims against you	u?	
 Do any creditors have nonpriority unsecured statute against against a No. You have nothing to report in this part. Submit this form to the statute of the stat	ne court with your other schedules.	
No. You have nothing to report in this part of the par		
va res	I order of the creditor who holds each claim. If a creditor has more than one important in the creditor who holds each claim it is. Do not list claims a lim. For each claim listed, identify what type of claim it is. Do not list claims a limit is the contribution of	one Iready
4. List all of your nonpriority unsecured claims in the alphabetical	l order of the creditor who holds each claim. If a cleditor has more aims a im. For each claim listed, identify what type of claim it is. Do not list claims a lim. For each claim listed, identify what type of claim it is. Do not list claims a list the other creditors in Part 3.If you have more than three nonpriority uns	secured
nonpriority unsecured claim, list the greater before holds a particular claim,	im. For each claim listed, identify what type of claim it is. Do not list claims a , list the other creditors in Part 3.If you have more than three nonpriority uns	1
claims fill out the Continuation Page of Part 2.	Total clai	
	TO(a) Gla	•••
 1	Last 4 digits of account number \$3,	893.74
CBCS [AER Loan]	CO/04/2010	
Nonpriority Creditor's Name	When was the debt incurred? 02/01/2019	
Post Office Box 2589	_	
Number Street Octumbus OH 43216	As of the date you file, the claim is: Check all that apply.	1
Columbus On 402 10	As of the date you file, the claim is substantial and the	
City	Contingent	:
Who incurred the debt? Check one.	☑ Unliquidated	
Debtor 1 only	☐ Disputed	
Debtor 2 only	Type of NONPRIORITY unsecured claim:	
Debtor 1 and Debtor 2 only		
At least one of the debtors and another	 Student loans Obligations arising out of a separation agreement or divorce 	
☐ Check if this claim is for a community debt	All the state of t	
	Debts to pension or profit-sharing plans, and other similar debts	1
is the claim subject to offset?	other. Specify Loan	
☑ No		
Yes		83.89
Matt's Sanitation	Last 4 digits of account number	
Nonpriority Creditor's Name	When was the debt incurred:	
Post Office Box 368		
Number Street	As of the date you file, the claim is: Check all that apply.	
Hinkley State ZIP Code	Contingent	
City State ZIP Code	Unliquidated	
Who incurred the debt? Check one.	Disputed	
Debtor 1 only	-	
Debtor 2 only	Type of NONPRIORITY unsecured claim:	
Debtor 1 and Debtor 2 only	☐ Student loans	
At least one of the debtors and another	Obligations arising out of a separation agreement or divorce	
Check if this claim is for a community debt	that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts	
Is the claim subject to offset?	Other. Specify	
No	Other. Specify	
Yes	$+ m = \frac{1}{2} \left(1$	ekin mendir in still benga din padamen enterpe open grap in p
And the first transfer and the control of the contr	Last 4 digits of account number\$	6,791.60
US Cellular	When was the debt incurred? 02/06/2019	
Nonpriority Creditor's Name 8410 West Bryn Mawr Avenue Suite 700	Willell was the door most and	
Chicago IL 60631	As of the date you file, the claim is: Check all that apply.	
City State ZIP Code	☐ Contingent	
Who incurred the debt? Check one.	Unliquidated	
	Disputed	
☑ Debtor 1 only ☐ Debtor 2 only		
Debtor 2 only Debtor 1 and Debtor 2 only	Type of NONPRIORITY unsecured claim:	
At least one of the debtors and another	Continue to the state of the st	
	Obligations arising out of a separation agreement or divorce	
Check if this claim is for a community debt	that you did not report as BNORIV Cialms	
Is the claim subject to offset?	Debts to pension or profit-sharing plans, and other similar debts Other. Specify <u>Cellular Phone</u>	
☑ No	Other. Specify Centural 1 House	
☐ Yes		

Case 19-42048 Doc 1 Filed 07/08/19 Entered 07/08/19 15:15:07 Desc Main Document Page 34 of 118

n	ebt	tor	1

Brandon First Name

Alian Middle Name Blaisdell Last Name

Case number (if known)_

		_
3	м.	ъ,

listing any entries on this page, number them beginning with	n 4.4, followed by 4.5, and so forth.	Total claim
	Last 4 digits of account number	\$ 1,528.00
AMS American Municipal Services cityof Kountze	00/07/0040	V
Ionpriority Creditor's Name	When was the debt incurred? 02/07/2019	
Post Office Box 118312		
Number Street TX 75011	As of the date you file, the claim is: Check all that apply.	
Carolitori State 7IP Code	☐ Contingent	
City State 211 Good	☑ Unliquidated	
Who incurred the debt? Check one.	☐ Disputed	
Debtor 1 only	Type of NONPRIORITY unsecured claim:	
Debtor 2 only		
Debtor 1 and Debtor 2 only	Student loansObligations arising out of a separation agreement or divorce that	
At least one of the debtors and another	you did not report as priority claims	
Check if this claim is for a community debt	Dobts to pension or profit-sharing plans, and other similar debts	
Is the claim subject to offset?	Other. Specify City of Kountze	
₩ No		
☐ Yes		on the control of the
	Last 4 digits of account number	\$ <u>1,075.9</u>
Hunter Warfield Nonpriority Creditor's Name	When was the debt incurred? 11/03/2016	
4620 Woodland Corporate Blvd	When was the dept incurred t	
Number Street	As of the date you file, the claim is: Check all that apply.	
Tampa FL 33614		
City State ZIP Code	── ☐ Contingent ☑ Unliquidated	
Who incurred the debt? Check one.	☐ Disputed	
Debtor 1 only Debtor 2 only	Type of NONPRIORITY unsecured claim:	
Debtor 1 and Debtor 2 only	Student loans	
At least one of the debtors and another	Obligations arising out of a separation agreement or divorce that	
☐ Check if this claim is for a community debt	you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts	
	Other. Specify	
Is the claim subject to offset?	- Carrier - L	
☑ No □ Yes		
		_{\$185.}
Bank of America	Last 4 digits of account number	
Nonpriority Creditor's Name	When was the debt incurred? 08/03/2017	
Post Office Box 790087		
Number Street	As of the date you file, the claim is: Check all that apply.	
St. LOUIS State 7IP Code	Contingent	
City	✓ Unliquidated	
Who incurred the debt? Check one.	☐ Disputed	
☐ Debtor 1 only	Type of NONPRIORITY unsecured claim:	
Debtor 2 only	Student loans	
 Debtor 1 and Debtor 2 only At least one of the debtors and another 	Obligations arising out of a separation agreement or divorce th	at
	you did not report as priority claims	
☐ Check if this claim is for a community debt	Debts to pension or profit-sharing plans, and other similar debt	•
Is the claim subject to offset?	☑ Other Specify Bank of America	
∑ No		
Yes		

Case 19-42048 Doc 1 Filed 07/08/19 Entered 07/08/19 15:15:07 Desc Main Document Page 35 of 118

Brandon First Name

Allan Middle Name Blaisdell Last Name

		_		
Cas	se	number	(if known)	

Deptor	3

List Others to Be Notified About a Debt That You Already Listed

e this page only if you have others to be notified about you ample, if a collection agency is trying to collect from you fo then list the collection agency here. Similarly, if you have m ditional creditors here. If you do not have additional persons	or bankruptcy, for a debt that you already listed in Parts 1 or 2. For or a debt you owe to someone else, list the original creditor in Parts 1 or ore than one creditor for any of the debts that you listed in Parts 1 or 2, list the to be notified for any debts in Parts 1 or 2, do not fill out or submit this page.
	On which entry in Part 1 or Part 2 did you list the original a same
lame	Line of (Check one): Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims
Number Street	Last 4 digits of account number
	Last 4 digital of december 1
City State ZIP Code	On which entry in Part 1 or Part 2 did you list the original creditor?
Name	Line of (Check one): Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured
Number Street	Claims
	Last 4 digits of account number
City State ZIP Code	On which entry in Part 1 or Part 2 did you list the original creditor?
Name	Line of (Check one): Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured
Number Street	Claims
	Last 4 digits of account number
City State ZIP Code	On which entry in Part 1 or Part 2 did you list the original creditor?
Name	Line of (Check one): Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured
Number Street	Claims
State ZIP Code	Last 4 digits of account number
City	On which entry in Part 1 or Part 2 did you list the original creditor?
Name	Line of (Check one): Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured
Number Street	Claims
	Last 4 digits of account number
City State ZIP Code	On which entry in Part 1 or Part 2 did you list the original creditor?
Name	Line of (Check one): Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured
Number Street	Claims
	Last 4 digits of account number
City State ZIP Code Conversion of the surviving and state of the state of the surviving and the surv	On which entry in Part 1 or Part 2 did you list the original creditor?
Name	Line of (Check one): Part 1: Creditors with Priority Unsecured Claim Part 2: Creditors with Nonpriority Unsecured
Number Street	Claims

Entered 07/08/19 15:15:07 Desc Main Case 19-42048 Filed 07/08/19 Doc 1 Page 36 of 118 Document

Debtor 1

Brandon First Name

Blaisdell

Allan Middle Name

Case number (if known)_

Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. § 159. Add the amounts for each type of unsecured claim.

			Total claim
Fotal claims From Part 1	6a. Domestic support obligations	6a.	\$
	6b. Taxes and certain other debts you owe the government	6b.	\$
	6c. Claims for death or personal injury while you were intoxicated	6c.	\$
	6d. Other. Add all other priority unsecured claims. Write that amount here.	6d	+ \$
	6e. Total. Add lines 6a through 6d.	6e.	\$
			Total claim
Total claims		6f.	\$
from Part 2	6g. Obligations arising out of a separation agreement or divorce that you did not report as priority claims	6g.	\$
	6h. Debts to pension or profit-sharing plans, and other similar debts	6h.	\$
	 Other. Add all other nonpriority unsecured claims. Write that amount here. 	6i.	+ \$
	6j. T otal. Add lines 6f through 6i.	6j.	\$

	ed 07/08/19 Entered ocument Page 37	d 07/08/19 15:1 of 118	5:07 De	esc Main	
Fill in this information to identify your case:					
Brandon Allan Blasid	Last Name				
Debtor 1 First Name Middle Name	Last Hame				
Debtor 2 Middle Name	Last Name				
(Spouse, if filing) First Name	_			_	
United States Bankruptcy Court for the: District				Check i amende	
Case number(if known)					
Official Form 106E/F Schedule E/F: Creditors Wh Be as complete and accurate as possible. Use Part 19	io Have Unsect	ured Claims	Stern with N	ONDRIORITY	12/15
Be as complete and accurate as possible. Use Part 1 the other party to any executory contracts or une A/B: Property (Official Form 106A/B) and on Schedule creditors with partially secured claims that are listed needed, copy the Part you need, fill it out, number the any additional pages, write your name and case number 1. List All of Your PRIORITY Unsecured	e G: Executory Contracts and in Schedule D: Creditors Who e entries in the boxes on the lo ber (if known).	Unexpired Leases (Oil	L. Dranarti	if more space	is
1. Do any creditors have priority unsecured claims	against you?				
1. Do any creditors have priority and					
No. Go to Part 2.				-talu for oach	claim For
 Yes. List all of your priority unsecured claims. If a cree each claim listed, identify what type of claim it is. If a nonpriority amounts. As much as possible, list the claunsecured claims, fill out the Continuation Page of Page 1. 	ditor has more than one priority claim has both priority and non aims in alphabetical order accor	unsecured claim, list the priority amounts, list tha ding to the creditor's na holds a particular claim,	t creditor separ t claim here an me. If you have list the other c	d show both p more than tw reditors in Part	riority and to priority t 3.
unsecured claims, fill out the Continuation Page of P	art 1. If more trials one creater,	truction booklet.)			
unsecured claims, fill out the Continuation Page of Page (For an explanation of each type of claim, see the in	structions for this form in the the	,	Total claim	Priority amount	Nonpriority amount
				amount	
			\$	_ \$	_ \$
2.1	Last 4 digits of account numb	er			
Priority Creditor's Name	When was the debt incurred?				
	When was the dept means				
Number Street	As of the date you file, the cla	im is: Check all that apply	<u>.</u>		
State 7IP Code	Contingent				
City	Unliquidated				
Who incurred the debt? Check one.	☐ Disputed				
Debtor 1 only	Type of PRIORITY unsecur	ed claim:			
☐ Debtor 2 only ☐ Debtor 1 and Debtor 2 only	Oomestic support obligations	i			
At least one of the debtors and another	☐ Taxes and certain other deb	ts you owe the government			
Check if this claim is for a community debt	Claims for death or personal intoxicated	injury while you were			
Is the claim subject to offset?	Other. Specify				

Yes

Official Form 106E/F

☐ No

☐ No☐ Yes

Number

City

Priority Creditor's Name

Debtor 1 only

Debtor 2 only

Street

Debtor 1 and Debtor 2 only

Is the claim subject to offset?

Who incurred the debt? Check one.

At least one of the debtors and another

☐ Check if this claim is for a community debt

2.2

Type of PRIORITY unsecured claim:

Domestic support obligations

Last 4 digits of account number

As of the date you file, the claim is: Check all that apply.

☐ Taxes and certain other debts you owe the government

Claims for death or personal injury while you were

When was the debt incurred?

ContingentUnliquidated

Disputed

intoxicated

Other. Specify

ZIP Code

Case 19-42048 Doc 1 Filed 07/08/19 Entered 07/08/19 15:15:07 Desc Main Document Page 38 of 118

Debtor 1 Brandon Allan Blasidell Case number (if known)______

listing any entries on this page, number them	beginning with 2.3, followed by 2.4, and so forth.	Total claim	Priority amount	Nonprio amount
	Last 4 digits of account number	\$	\$	_ \$
Priority Creditor's Name	When was the debt incurred?			
Number Street	As of the date you file, the claim is: Check all that apply.			
	☐ Contingent			
City State ZIP Code	Unliquidated Disputed			
Who incurred the debt? Check one.	Type of PRIORITY unsecured claim:			
☑ Debtor 1 only ☑ Debtor 2 only	••			
Debtor 1 and Debtor 2 only	 Domestic support obligations Taxes and certain other debts you owe the government 			
At least one of the debtors and another	Claims for death or personal injury while you were			
Check if this claim is for a community debt	intoxicated Other. Specify			
Is the claim subject to offset?				
□ No □ Yes		and hand to the transfer of th		
Priority Creditor's Name	Last 4 digits of account number	\$	\$	\$
•	When was the debt incurred?			
Number Street	As of the date you file, the claim is: Check all that apply.			
	☐ Contingent			
City State ZIP Code	Unliquidated			
	☐ Disputed			
Who incurred the debt? Check one.	Type of PRIORITY unsecured claim:			
Debtor 1 only Debtor 2 only	••			
Debtor 1 and Debtor 2 only	 Domestic support obligations Taxes and certain other debts you owe the government 			
☐ At least one of the debtors and another	Claims for death or personal injury while you were			
☐ Check if this claim is for a community debt	Intoxicated ☐ Other. Specify			
Is the claim subject to offset?	Carlet. Opcomy			
□ No				
Yes.		nograpy contractive contractive states to the state of the distance of the dis	unter punt que en relación estructura de estación de contra de la companya de estación de contra de la company	managan yang serindah sa mengahan serindah sa
Priority Creditor's Name	Last 4 digits of account number	\$	\$	\$
	When was the debt incurred?			
Number Street	As of the date you file, the claim is: Check all that apply	<i>i</i> .		
	□ Contingent			
City State ZIP Code	Unliquidated			
MO TO COMPANY TO A STATE OF THE	☐ Disputed			
Who incurred the debt? Check one.	Type of PRIORITY unsecured claim:			
Debtor 1 only Debtor 2 only				
Debtor 1 and Debtor 2 only	Domestic support obligationsTaxes and certain other debts you owe the government			
At least one of the debtors and another	☐ Taxes and certain other debts you owe the government. ☐ Claims for death or personal injury while you were			
☐ Check if this claim is for a community debt	intoxicated Other. Specify	Send-Branch all all all all all any cape	en bladen fra sterre frage typer ei market i rakt ei albertege.	etinete et gegge om god i deflikkende klassiske til
is the claim subject to offset?	eat Office, Opposity	-		

Case 19-42048 Doc 1 Filed 07/08/19 Entered 07/08/19 15:15:07 Desc Main Document Page 39 of 118

Brandon Debtor 1

Allan Middle Name First Name

Biasideli Last Name

Part 2	List All of Your NONPRIORIT	Y Unsec	ured Claims		
	any creditors have nonpriority unsections. You have nothing to report in this page.	cured clai	ms against you it this form to the	? court with your other schedules.	
4. List	t all of your nonpriority unsecured cla priority unsecured claim, list the credito	r holds a p	e alphabetical o ely for each claim particular claim, l	order of the creditor who holds each claim. If a creditor has months. For each claim listed, identify what type of claim it is. Do not list is the other creditors in Part 3.If you have more than three nonpr	ore than one claims already iority unsecured
cla	ims fill out the Continuation Page of Par	12.			Total claim
	Coastal Credit LLC			Last 4 digits of account number 1 2 1 3 \$	17,745.00
4	ionpriority Creditor's Name 10333 N. Meridian Suite 400			When was the debt incurred? 09/11/2011	
1	Hulanapona	N	46290 ZIP Code	As of the date you file, the claim is: Check all that apply.	
	Sity Nho incurred the debt? Check one.			☐ Contingent ☑ Unliquidated	,
(✓ Debtor 1 only ☐ Debtor 2 only			☐ Disputed	
	☐ Debtor 2 only ☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another			Type of NONPRIORITY unsecured claim: Student loans	
	Check If this claim is for a communi	ty debt		 Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts 	
	is the ciaim subject to offset? I No			Other. Specify	
4.2	☐ Yes Coastal Credit LLC	naprauguses program og 155 beginn had det s		Last 4 digits of account number 0 2 1 2 07/01/2010	13,281.00
	Nonpriority Creditor's Name 10333 N. Meridian Suite 400				
	Number Street Indianapolis	IN	46290	As of the date you file, the claim is: Check all that apply.	
	City Who incurred the debt? Check one.	State	ZIP Code	☐ Contingent ☐ Unliquidated ☐ Disputed	
	☐ Debtor 1 only ☐ Debtor 2 only ☐ Debtor 1 and Debtor 2 only			Type of NONPRIORITY unsecured claim:	
	☐ At least one of the debtors and another ☐ Check if this claim is for a communication.	nity debt		 Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims 	
	Is the claim subject to offset?	mry down		Debts to pension or profit-sharing plans, and other similar debts Other. Specify	
4.3	☐ Yes Mid Florida Finance LLC	yang segang salah sa	ang manakii panan di gamen sanca ka pan maya na pina sanca ka pan maya na pina sanca ka sanca ka sanca ka sanc	Last 4 digits of account number 1 7 5 2	\$ 9,333.00
	Nonpriority Creditor's Name 1200 W. Memorial Blvd			When was the debt incurred? 07/09/2015	
	Number Street Lakeland	FL State	33815 ZIP Code	As of the date you file, the claim is: Check all that apply.	
	City Who incurred the debt? Check one.			☐ Contingent ☐ Unliquidated	
	☑ Debtor 1 only ☐ Debtor 2 only			Disputed	
	Debtor 1 and Debtor 2 onlyAt least one of the debtors and anothe	ır		Type of NONPRIORITY unsecured claim: Student loans	
	☐ Check if this claim is for a community to claim subject to offset?	unity debt		 Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debt 	s
	M No Yes			Other. Specify Loan	_

Case 19-42048 Doc 1 Filed 07/08/19 Entered 07/08/19 15:15:07 Desc Main

Document Page 40 of 118 Biasidell Case number (if known)_ Ailan Brandon Debtor 1 Middle Name First Name Your NONPRIORITY Unsecured Claims — Continuation Page Part 2:

sting any entries on this page, number them beginning with	4.4, followed by 4.5, and so forth. Total claim
	Last 4 digits of account number 0 2 8 0 \$ 1,646.
Monterey Collection Services	When was the debt incurred? $\frac{02/02/2017}{12000000000000000000000000000000000000$
095 Avenida DE LA Plata	As of the date you file, the claim is: Check all that apply.
Oceanside CA 92056	
ity State ZIP Code	☐ Contingent ☐ Unliquidated
Vho incurred the debt? Check one.	☐ Disputed
Debtor 1 only	Type of NONPRIORITY unsecured claim:
Debtor 2 only	
Debtor 1 and Debtor 2 only	Student loansObligations arising out of a separation agreement or divorce that
At least one of the debtors and another	you did not report as priority claims
Check if this claim is for a community debt	□ Debts to pension or profit-sharing plans, and other similar debts □ Other. Specify Collection
s the claim subject to offset?	Other. Specify Collection
∑ No	
Yes	
	Last 4 digits of account number 5 6 9 1 \$ 5,75
Acceptance Now	00/04/0042
Nonpriority Creditor's Name	When was the debt incurred? 03/01/2013
5501 Headquarter Number Street	As of the date you file, the claim is: Check all that apply.
Plano TX 75024	
City State ZIP Code	☐ Contingent ☐ Unliquidated
Who incurred the debt? Check one.	Disputed
Debtor 1 only Debtor 2 only	Type of NONPRIORITY unsecured claim:
Debtor 1 and Debtor 2 only	Student loans
At least one of the debtors and another	Obligations arising out of a separation agreement or divorce that you did not report as priority claims
☐ Check if this claim is for a community debt	Debts to pension or profit-sharing plans, and other similar debts
Is the claim subject to offset?	Other. Specify
M No	
☐ Yes	
$y_{0}(y_{0}(x_{0}),y_{0}) = y_{0}(x_{0}) + y_{0}($	Last 4 digits of account number 0 5 4 0
Acceptance Now	
Nonpriority Creditor's Name	When was the debt incurred? 08/31/2014
5501 Headquarter	As of the date you file, the claim is: Check all that apply.
Number Street TX 75024	
Plano IA 75024 City State ZIP Code	☐ Contingent
•	☑ Unliquidated ☐ Disputed
Who incurred the debt? Check one.	
Debtor 1 only	Type of NONPRIORITY unsecured claim:
☐ Debtor 2 only ☐ Debtor 1 and Debtor 2 only	Student loans
■ Debtor 1 and Debtor 2 only At least one of the debtors and another	Obligations arising out of a separation agreement or divorce that
☐ Check If this claim is for a community debt	you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts
	Other. Specify
Is the claim subject to offset?	
√ No	

Case 19-42048 Doc 1 Filed 07/08/19 Entered 07/08/19 15:15:07 Desc Main Page 41 of 118 Document

Debtor 1 First Name

Brandon

Allan

Blasidell

Case number (if known)_

Part 3:

List Others to Be Notified About a Debt That You Already Listed

ditional c	reditors nere. II you	I do not nave a	aditional poloe.	nore than one creditor for any or the doors that you instruct or submit this page.
				On which entry in Part 1 or Part 2 did you list the original creditor?
lame				Line of (Check one): Part 1: Creditors with Priority Unsecured Claims
lumber	Street			☐ Part 2: Creditors with Nonpriority Unsecured Clair
				Last 4 digits of account number
City		State	ZIP Code	
···•		a service de la companya de la comp		On which entry in Part 1 or Part 2 did you list the original creditor?
lame				Line of (Check one): Part 1: Creditors with Priority Unsecured Claims
lumber	Street			☐ Part 2: Creditors with Nonpriority Unsecured
			-	Claims
City		State	ZIP Code	Last 4 digits of account number
enter the transfer of the contract of the cont	agen folk and remain transfer on the gold of the grant of the folk of the first of the contract of	2000年1月1日 - 1900年1月1日 - 1900年1月 - 1900年1日 - 1	and a section of the	On which entry in Part 1 or Part 2 did you list the original creditor?
lame				Line of (Check one): Part 1: Creditors with Priority Unsecured Claims
l	Street			Part 2: Creditors with Nonpriority Unsecured
Number	Street			Claims
				Last 4 digits of account number
City		State	ZIP Code	On which entry in Part 1 or Part 2 did you list the original creditor?
Name				
				Line of (Check one): Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured
Number	Street			Claims
				Last 4 digits of account number
City		State	ZIP Code	D 44 - D-42 did you list the original creditor?
Name				On which entry in Part 1 or Part 2 did you list the original creditor?
(vario				Line of (Check one): Part 1: Creditors with Priority Unsecured Claim
Number	Street			☐ Part 2: Creditors with Nonpriority Unsecured Claims
				Last 4 digits of account number
City		State	ZIP Code	
				On which entry in Part 1 or Part 2 did you list the original creditor?
Name				Line of (Check one): Part 1: Creditors with Priority Unsecured Claim
Number	Street			Part 2: Creditors with Nonpriority Unsecured Claims
				Last 4 digits of account number
City	Children of the control of the state of the	State	ZIP Code	
Name				On which entry in Part 1 or Part 2 did you list the original creditor?
144,110				Line of (Check one): Part 1: Creditors with Priority Unsecured Claim
Number	Street			Part 2: Creditors with Nonpriority Unsecured Claims

Case 19-42048 Doc 1 Filed 07/08/19 Entered 07/08/19 15:15:07 Desc Main Page 42 of 118 Document

Debtor 1

Brandon First Name

Allan

Blasidell

Case number (if known)_

Part 4:

Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. § 159. Add the amounts for each type of unsecured claim.

			Total claim
Total claims	6a. Domestic support obligations	6a.	\$
from Part 1	6b. Taxes and certain other debts you owe the government	6b.	\$
	6c. Claims for death or personal injury while you were intoxicated	6c.	\$
	6d. Other. Add all other priority unsecured claims. Write that amount here.	6d	+ \$
	6e. Total. Add lines 6a through 6d.	6e.	\$
			Total claim
Total claims	6f. Student loans	6f.	\$
from Part 2	6g. Obligations arising out of a separation agreement or divorce that you did not report as priority claims	6g.	\$
	6h. Debts to pension or profit-sharing plans, and other similar debts	6h.	\$
	 Other. Add all other nonpriority unsecured claims. Write that amount here. 	6i.	+ \$
	6j. Total. Add lines 6f through 6i.	6j.	\$

Case 19-42048 Doc 1 Filed 07/08/19 Entered 07/08/19 15:15:07 Desc Main Document Page 43 of 118

	and the second s			
Fill in this information to identify your case:				
Debtor 1 Brandon Allan Blasidell	Last Name			
First Name Middle Name	Last Manne			
Debtor 2 (Spouse, if filling) First Name Middle Name	Last Name			
United States Bankruptcy Court for the: District	of		Check	if this is an
				led filing
Case number(if known)				_
Official Form 106E/F				46145
Schedule E/F: Creditors Wi	io Have Unsecured C	laims		12/15
		4 o for anaditore with P	IONPRIORITY	r claims.
I totale ather north to any executory contracts or any	, , , , , , , , , , , , , , , , , , ,	Sacre (Official Form 10	NG1. DO 1101 11	iciauc arry
creditors with partially secured claims that are instead	e entries in the boxes on the left. Attach the	Continuation Page to	this page. O	it the top of
any additional pages, write your name and case num	ber (if known).			
Part 1: List All of Your PRIORITY Unsecured	l Claims			
1. Do any creditors have priority unsecured claims No. Go to Part 2.				
· · · · · · · · · · · · · · · · · · ·				claim For
Yes. 2. List all of your priority unsecured claims. If a cre	ditor has more than one priority unsecured cla	im, list the creditor sepa	rately for each id show both p	riority and
alsim listed identity what type of claim it is in a	Oldiffi field and a state and	ditor's name it voll have	a more uran w	70 Dilonty
			reallors in Fai	ξ 3.
(For an explanation of each type of claim, see the in	structions for this form in the instruction books	et.) Total claim	Priority	Nonpriority
			amount	amount
		\$		\$
Priority Creditor's Name	Last 4 digits of account number			
Phonty Cleutor's Name	When was the debt incurred?			
Number Street	As of the date you file, the claim is: Check al	i that apply.		
	Contingent			
City State 7IP Code	Unliquidated			
Who incurred the debt? Check one.	Disputed			
Debtor 1 only	Type of PRIORITY unsecured claim:			
Debtor 2 only	Domestic support obligations			
□ Debtor 1 and Debtor 2 only□ At least one of the debtors and another	☐ Taxes and certain other debts you owe the g	overnment		
☐ Check if this claim is for a community debt	Claims for death or personal injury while you	were		
Is the claim subject to offset?	intoxicated			
□ No	Other. Specify			and the same same of the control of
			were construction of section 2	¢.
2.2	Last 4 digits of account number	\$	•	Ψ
Priority Creditor's Name	When was the debt incurred?			
Number Street	As of the date you file, the claim is: Check	all that apply.		
	Contingent			
City State ZIP Code	Unliquidated			
Who incurred the debt? Check one.	☐ Disputed			
Debtor 1 only	Type of PRIORITY unsecured claim:			
Debtor 2 only	Domestic support obligations			
Debtor 1 and Debtor 2 only	Taxes and certain other debts you owe the	government		
At least one of the debtors and another	Claims for death or personal injury while you	u were		
☐ Check if this claim is for a community debt	intoxicated Other. Specify			
Is the claim subject to offset?	<u> </u>			

Yes

Case 19-42048 Doc 1 Filed 07/08/19 Entered 07/08/19 15:15:07 Desc Main Document Page 44 of 118

Blasidell Last Name Case number (if known)_ Allan Brandon

Your PRIORITY Unsecured Claims –	neginning with 2.3, followed by 2.4, and so forth.	Total claim	Priority amount	Nonpriorit amount
	Last 4 digits of account number	\$	\$	_ \$
riority Creditor's Name	When was the debt incurred?			
Number Street	As of the date you file, the claim is: Check all that apply.			
710.0.4	☐ Contingent ☐ Unliquidated			
City State ZIP Code	☐ Disputed			
Who incurred the debt? Check one.	·			
Debtor 1 only	Type of PRIORITY unsecured claim:			
Debtor 2 only	Domestic support obligations			
Debtor 1 and Debtor 2 only	Taxes and certain other debts you owe the government			
At least one of the debtors and another	Claims for death or personal injury while you were			
☐ Check if this claim is for a community debt	intoxicated			
Gneck if this claim is for a command, 2020	Other. Specify			
Is the claim subject to offset?				
☐ No				
Yes		t med to electron ments of a discrete states are separate.	elementation of the contemporary and accommodition of	al de la latina de la
ووالمهايية والمرابعين المهارية بالمرابعية والمحامة والمحام	Servergener of Colon Commence of Colon comment	\$	\$	\$
	Last 4 digits of account number	4		
Priority Creditor's Name	When was the debt incurred?			
Number Street				
Number 30 eec	As of the date you file, the claim is: Check all that apply			
	☐ Contingent ☐ Unliquidated			
City State ZIP Code	Disputed			
Who incurred the debt? Check one.	Ci Disputes			
	Type of PRIORITY unsecured claim:			
Debtor 1 only Debtor 2 only	Domestic support obligations			
Debtor 2 only Debtor 1 and Debtor 2 only	☐ Taxes and certain other debts you owe the government			
At least one of the debtors and another	Claims for death or personal injury while you were			
	intoxicated			
☐ Check if this claim is for a community debt	Other. Specify	-		
Is the claim subject to offset?				
☐ No				
			and the state of t	
endermoted by Anne Gride the contract of the c	Last 4 digits of account number	\$	\$	\$
Priority Creditor's Name	Last 4 digits of account manners			
Priority distance of the second secon	When was the debt incurred?			
Number Street	me at Latin to Obsert all that ann	lv.		
	As of the date you file, the claim is: Check all that app	y.		
	☐ Contingent			
City State ZIP Code	Unliquidated			
•	☐ Disputed			
Who incurred the debt? Check one.	T CODIODITY uncopured claim			
Debtor 1 only	Type of PRIORITY unsecured claim:			
Debtor 2 only	Domestic support obligations			
Debtor 1 and Debtor 2 only	Taxes and certain other debts you owe the governmen	Ţ		
At least one of the debtors and another	Claims for death or personal injury while you were	Minister de la Company de la casa	and the said eliminate Control System (System Society)	elimpe street work and the great of great street and
Check if this claim is for a community debt	intoxicated Other. Specify			
	Culor opposity			
Is the claim subject to offset?				

Debtor 1

Case 19-42048 Doc 1 Filed 07/08/19 Entered 07/08/19 15:15:07 Desc Main Document Page 45 of 118

De	hto	- 1	

Brandon

Allan

Blasidell

U			
	Coco	number	lif kno

List All of Your NONPRIORITY Unsecured Claims Part 2: 3. Do any creditors have nonpriority unsecured claims against you? No. You have nothing to report in this part. Submit this form to the court with your other schedules. ☑ Yes 4. List all of your nonpriority unsecured claims in the alphabetical order of the creditor who holds each claim. If a creditor has more than one nonpriority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. Do not list claims already included in Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3.If you have more than three nonpriority unsecured claims fill out the Continuation Page of Part 2. Total claim Last 4 digits of account number 4 6 3 3 543.00 FSNB, NA 12/01/2012 Nonpriority Creditor's Name When was the debt incurred? post Office Box 33009 Number 73503 Ok As of the date you file, the claim is: Check all that apply. Ft.Sill State Contingent ☑ Unliquidated Who incurred the debt? Check one. ☐ Disputed Debtor 1 only Debtor 2 only Type of NONPRIORITY unsecured claim: Debtor 1 and Debtor 2 only Student loans At least one of the debtors and another Obligations arising out of a separation agreement or divorce ☐ Check if this claim is for a community debt that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Is the claim subject to offset? Other. Specify Bank Account ☑ No Yes 3,821.00 Last 4 digits of account number Pioneer/PSSF inc 06/04/2013 When was the debt incurred? Nonpriority Creditor's Name 3240 E. Tropiciana As of the date you file, the claim is: Check all that apply. Number Street 89121 NV Las Vegas ZIP Code State Contingent Unliquidated Who incurred the debt? Check one. ☐ Disputed Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only Debtor 1 and Debtor 2 only Student loans At least one of the debtors and another Obligations arising out of a separation agreement or divorce that you did not report as priority claims Check if this claim is for a community debt Debts to pension or profit-sharing plans, and other similar debts Other. Specify Collection Is the claim subject to offset? M No Yes 1,045.00 Last 4 digits of account number 1 7 4 0 Verizon Wireless 12/13/2012 When was the debt incurred? Nonpriority Creditor's Name Post Office Box 650051 Number 75265 TX As of the date you file, the claim is: Check all that apply. Dallas ZIP Code State Contingent Who incurred the debt? Check one. **☑** Unliquidated Disputed Debtor 1 only Debtor 2 only Type of NONPRIORITY unsecured claim: Debtor 1 and Debtor 2 only At least one of the debtors and another Student loans Obligations arising out of a separation agreement or divorce Check if this claim is for a community debt that you did not report as priority claims ☐ Debts to pension or profit-sharing plans, and other similar debts Is the claim subject to offset? Other, Specify Cellular Phone M No Yes

Case 19-42048 Doc 1 Filed 07/08/19 Entered 07/08/19 15:15:07 Desc Main Document Page 46 of 118

Debtor 1

Allan Brandon Middle Name First Name

Blasidell Last Name

Case number (if known)_

Your NONPRIORITY Unsecured Claims — Continuation Page

listing any entries on this page, number them beginning with	4.4, followed by 4.5, and so forth.	Total claim
Webbank/Fingerhut	Last 4 digits of account number 0 7 5 5	\$ 83.0
Nonpriority Creditor's Name	When was the debt incurred? 04/03/2014	
6250 Ridgewood Rd.	 As of the date you file, the claim is: Check all that apply. 	
Number Street St. Cloud MN 56303		
City State ZIP Code	☐ Contingent ☐ Unliquidated	
Who incurred the debt? Check one.	Disputed	
Debtor 1 only		
Debtor 2 only	Type of NONPRIORITY unsecured claim:	
Debtor 1 and Debtor 2 only	Student loans	
At least one of the debtors and another	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
☐ Check If this claim is for a community debt	Debts to pension or profits sharing plans, and other similar debts	
Is the claim subject to offset?	Other. Specify Credit	
☑ No		
Yes		a ha th' Taman an Bhail Aire an Aire a
	Last 4 digits of account number	\$
Nonpriority Creditor's Name	When was the debt incurred?	
Number Street	As of the date you file, the claim is: Check all that apply.	
City State ZIP Code	Contingent	
	Unliquidated	
Who incurred the debt? Check one.	Disputed	
Debtor 1 only	Type of NONPRIORITY unsecured claim:	
☐ Debtor 2 only ☐ Debtor 1 and Debtor 2 only	☐ Student loans	
At least one of the debtors and another	Obligations arising out of a separation agreement or divorce that	
	you did not report as priority claims	
☐ Check if this claim is for a community debt	Debts to pension or profit-sharing plans, and other similar debts	
is the claim subject to offset?	Other. Specify	
□ No □ Yes		
	Last 4 digits of account number	\$
the Constitution Marrie		
Nonpriority Creditor's Name	When was the debt incurred?	
Number Street	As of the date you file, the claim is: Check all that apply.	
City State ZIP Code	Contingent	
Adv. dela Cherikana	☐ Unliquidated☐ Disputed	
Who incurred the debt? Check one.	·	•
Debtor 1 only	Type of NONPRIORITY unsecured claim:	
☐ Debtor 2 only ☐ Debtor 1 and Debtor 2 only	☐ Student loans	
At least one of the debtors and another	Obligations arising out of a separation agreement or divorce the	at
☐ Check if this claim is for a community debt	you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts	3
	Debts to pension or profit-sharing plans, and each of sharing plants, and each of sharing plants pla	
Is the claim subject to offset?	Guion Opposity	
☐ No		

Case 19-42048 Doc 1 Filed 07/08/19 Entered 07/08/19 15:15:07 Desc Main Document Page 47 of 118

Debtor 1

Brandon First Name Allan

Blasidell Last Name Case number (if known)_

Part 3:

List Others to Be Notified About a Debt That You Already Listed

ditional creditors here. If you do not have additional persor	for a debt you owe to someone else, list the brighlar creditor and the more than one creditor for any of the debts that you listed in Parts 1 or 2, list the list to be notified for any debts in Parts 1 or 2, do not fill out or submit this page.
	On which entry in Part 1 or Part 2 did you list the original creditor?
lame	Line of (Check one): Part 1: Creditors with Priority Unsecured Claims
	Part 2: Creditors with Nonpriority Unsecured Claim
lumber Street	
	Last 4 digits of account number
City State ZIP Code	
	On which entry in Part 1 or Part 2 did you list the original creditor?
Name	Line of (Check one): Part 1: Creditors with Priority Unsecured Claims
	Part 2: Creditors with Nonpriority Unsecured
Number Street	Claims
	Last 4 digits of account number
City State ZIP Code	
	On which entry in Part 1 or Part 2 did you list the original creditor?
Name	Line of (Check one): Part 1: Creditors with Priority Unsecured Claims
	Line of (Check dife). ☐ Part 2: Creditors with Nonpriority Unsecured
Number Street	Claims
	Last 4 digits of account number
City State ZIP Code	
este production of the first of the second o	On which entry in Part 1 or Part 2 did you list the original creditor?
Name	Line of (Check one): Part 1: Creditors with Priority Unsecured Claims
	Part 2: Creditors with Nonpriority Unsecured
Number Street	Claims
	Last 4 digits of account number
City State ZIP Code	and the control of th
	On which entry in Part 1 or Part 2 did you list the original creditor?
Name	Line of (Check one): Part 1: Creditors with Priority Unsecured Claims
	Line of (Check one). Part 1: Ordalists with Nonpriority Unsecured
Number Street	Claims
	Last 4 digits of account number
City State ZIP Code	
And the second s	On which entry in Part 1 or Part 2 did you list the original creditor?
Name	Line of (Check one): Part 1: Creditors with Priority Unsecured Claim
Charles	Part 2: Creditors with Nonpriority Unsecured
Number Street	Claims
	Last 4 digits of account number
City State ZIP Code	
	On which entry in Part 1 or Part 2 did you list the original creditor?
Name	Line of (Check one): Part 1: Creditors with Priority Unsecured Claim
Number Street	Part 2: Creditors with Nonpriority Unsecured
	Claims
	Last 4 digits of account number

Case 19-42048 Doc 1 Filed 07/08/19 Entered 07/08/19 15:15:07 Desc Main Document Page 48 of 118

Debtor 1

Brandon First Name Alian

Blasidell Last Name Case number (if known)___

Part 4:

Add the Amounts for Each Type of Unsecured Claim

6.	Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. § 159. Add the amounts for each type of unsecured claim.

			Total claim
Total claims	6a. Domestic support obligations	6a.	\$
from Part 1	6b. Taxes and certain other debts you owe the government	6b.	\$
	6c. Claims for death or personal injury while you were intoxicated	6c.	\$
	6d. Other. Add all other priority unsecured claims. Write that amount here.	6d. -	± \$
	6e. Total. Add lines 6a through 6d.	6e.	\$
			Total claim
Total claims	6f. Student loans	6f.	\$
from Part 2	6g. Obligations arising out of a separation agreement or divorce that you did not report as priority claims	6g.	\$
	6h. Debts to pension or profit-sharing plans, and other similar debts	6h.	\$
	6i. Other. Add all other nonpriority unsecured claims.	01	+ \$
	Write that amount here.	6i.	3

Official Form 106E/F

Case 19-42048 Doc 1 Filed 07/08/19 Entered 07/08/19 15:15:07 Desc Main Document Page 49 of 118

Debtor 1 Brandon Allan B				
	lasidell			
First Name Middle Name Debtor 2	Last Name			
(Spouse, if filling) First Name Middle Name	Last Name			
United States Bankruptcy Court for the:	District of			
Case number(If known)				eck if this is
D#:-:-! = 100=:=			anı	ended filing
Official Form 106E/F				
	Who Have Unsecured Claim			12/15
/B: Property (Official Form 106A/B) and on Sch reditors with partially secured claims that are li- eeded, copy the Part you need, fill it out, numbe ny additional pages, write your name and case	·	(Official Form	ontracts on . 106G). Do no	<i>Schedule</i> t include anv
The state of the s				
Do any creditors have priority unsecured clai No. Go to Part 2.	ms against you?			
Yes.				
List all of your priority unsecured claims. If a	creditor has more than one priority unsecured claim, list			
each claim listed, identify what type of claim it is.	creditor has more than one priority unsecured claim, list if a claim has both priority and nonpriority amounts, list the claims in alphabetical order according to the constitution.	the creditor sepa	arately for eac	h claim. For
nonpriority amounts. As much as possible, list the	is a carm has both priority and nonpriority amounts, list the chairs in alphabetical order according to the creditor's references.	nat claim here a name. If you hav	nd snow both 'e more than t	priority and
		n, list the other o	creditors in Pa	wo priority irt 3
(For an explanation of each type of claim, see the	instructions for this form in the instruction booklet.)			
	·	Total claim	Priority	Nonpriori
			amount	amount
Delate Control 1	Last 4 digits of account number	\$	•	
Priority Creditor's Name		Ψ	_ ə	_ \$
Number Street	When was the debt incurred?			
	An addition to a company of the company			
	As of the date you file, the claim is: Check all that apply	y.		
City State 7IP Code	Contingent	y.		
Who incurred the debt? Check one.	Contingent Unliquidated	y.		
Who incurred the debt? Check one. Debtor 1 only	Contingent	y.		
Who incurred the debt? Check one. Debtor 1 only Debtor 2 only	Contingent Unliquidated Disputed	y.		
Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only	Contingent Unliquidated Disputed Type of PRIORITY unsecured claim:	y.		
Who incurred the debt? Check one. Debtor 1 only Debtor 2 only	Contingent Unliquidated Disputed Type of PRIORITY unsecured claim: Domestic support obligations	y.		
Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another	Contingent Unliquidated Disputed Type of PRIORITY unsecured claim: Domestic support obligations Taxes and certain other debts you owe the government	y.		
Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt	Contingent Unliquidated Disputed Type of PRIORITY unsecured claim: Domestic support obligations Taxes and certain other debts you owe the government Claims for death or personal injury while you were	y.		
Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt	Contingent Unliquidated Disputed Type of PRIORITY unsecured claim: Domestic support obligations Taxes and certain other debts you owe the government Claims for death or personal injury while you were intoxicated			
Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt is the claim subject to offset? No	Contingent Unliquidated Disputed Type of PRIORITY unsecured claim: Domestic support obligations Taxes and certain other debts you owe the government Claims for death or personal injury while you were			
Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt is the claim subject to offset?	Contingent Unliquidated Disputed Type of PRIORITY unsecured claim: Domestic support obligations Taxes and certain other debts you owe the government Claims for death or personal injury while you were intoxicated Other. Specify			
Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check If this claim is for a community debt Is the claim subject to offset? No Yes	Contingent Unliquidated Disputed Type of PRIORITY unsecured claim: Domestic support obligations Taxes and certain other debts you owe the government Claims for death or personal injury while you were intoxicated Other. Specify		Zornik s koleknok Akeeliga kupita kursissa kursissa kursissa kursissa kursissa kursissa kursissa kursissa kur	
Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check If this claim is for a community debt is the claim subject to offset? No	Contingent Unliquidated Disputed Type of PRIORITY unsecured claim: Domestic support obligations Taxes and certain other debts you owe the government Claims for death or personal injury while you were intoxicated Other. Specify Last 4 digits of account number		torne a nationa managepia nasio na piene kilippana.	
Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset? No Yes	Contingent Unliquidated Disputed Type of PRIORITY unsecured claim: Domestic support obligations Taxes and certain other debts you owe the government Claims for death or personal injury while you were intoxicated Other. Specify		tioned in within an among planting on a growing property of the control of the co	NOTION AND AND AND AND AND AND AND AND AND AN
Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset? No Yes Priority Creditor's Name	Contingent Unliquidated Disputed Type of PRIORITY unsecured claim: Domestic support obligations Taxes and certain other debts you owe the government Claims for death or personal injury while you were intoxicated Other. Specify Last 4 digits of account number When was the debt incurred?	alle a constant de maquema conseguio sersi à versa avec.	to the standard and the standard policy and the standa	
Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset? No Yes Priority Creditor's Name	Contingent Unliquidated Disputed Type of PRIORITY unsecured claim: Domestic support obligations Taxes and certain other debts you owe the government Claims for death or personal injury while you were intoxicated Other. Specify Last 4 digits of account number	alle a constant de maquema conseguio sersi à versa avec.	torik nurinnannegigi ungi unyapani pipal.	NOONA AMARIA ARAA ARAA ARAA ARAA ARAA ARAA A
Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset? No Yes Priority Creditor's Name Number Street	Contingent Unliquidated Disputed Type of PRIORITY unsecured claim: Domestic support obligations Taxes and certain other debts you owe the government Claims for death or personal injury while you were intoxicated Other. Specify Last 4 digits of account number When was the debt incurred? As of the date you file, the claim is: Check all that apply.	alle a constant de maquema conseguio sersi à versa avec.		NOONANAAA ATTAN SIJEETSIA ALOOMAA AA
Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset? No Yes Priority Creditor's Name Number Street City State ZIP Code Who incurred the debt? Check one.	Contingent Unliquidated Disputed Type of PRIORITY unsecured claim: Domestic support obligations Taxes and certain other debts you owe the government Claims for death or personal injury while you were intoxicated Other. Specify Last 4 digits of account number When was the debt incurred? As of the date you file, the claim is: Check all that apply. Contingent	alle a constant de maquema conseguio sersi à versa avec.	tan ta hadinada hadiga kanjili	
Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset? No Yes Priority Creditor's Name Number Street City State ZIP Code Who incurred the debt? Check one. Debtor 1 only	Contingent Unliquidated Disputed Type of PRIORITY unsecured claim: Domestic support obligations Taxes and certain other debts you owe the government Claims for death or personal injury while you were intoxicated Other. Specify Last 4 digits of account number When was the debt incurred? As of the date you file, the claim is: Check all that apply. Unliquidated Disputed	alle a constant de maquema conseguio sersi à versa avec.		
Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset? No Yes Priority Creditor's Name Number Street City State ZIP Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only	Contingent Unliquidated Disputed Type of PRIORITY unsecured claim: Domestic support obligations Taxes and certain other debts you owe the government Claims for death or personal injury while you were intoxicated Other. Specify Last 4 digits of account number When was the debt incurred? As of the date you file, the claim is: Check all that apply. Unliquidated Disputed Type of PRIORITY unsecured claim:	alle a constant de maquema conseguio sersi à versa avec.		
Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset? No Yes Priority Creditor's Name Number Street City State ZIP Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only	Contingent Unliquidated Disputed Type of PRIORITY unsecured claim: Domestic support obligations Taxes and certain other debts you owe the government Claims for death or personal injury while you were intoxicated Other. Specify Last 4 digits of account number When was the debt incurred? As of the date you file, the claim is: Check all that apply. Unliquidated Disputed Type of PRIORITY unsecured claim: Domestic support obligations	alle a constant de maquema conseguio sersi à versa avec.		STOCK AND
Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset? No Yes Priority Creditor's Name Number Street City State ZIP Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only	Contingent Unliquidated Disputed Type of PRIORITY unsecured claim: Domestic support obligations Taxes and certain other debts you owe the government Claims for death or personal injury while you were intoxicated Other. Specify Last 4 digits of account number When was the debt incurred? As of the date you file, the claim is: Check all that apply. Unliquidated Disputed Type of PRIORITY unsecured claim: Domestic support obligations Taxes and certain other debts you owe the government	alle a constant de maquema conseguio sersi à versa avec.		\$
Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset? No Yes Priority Creditor's Name Number Street City State ZIP Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt	Contingent Unliquidated Disputed Type of PRIORITY unsecured claim: Domestic support obligations Taxes and certain other debts you owe the government Claims for death or personal injury while you were intoxicated Other. Specify Last 4 digits of account number When was the debt incurred? As of the date you file, the claim is: Check all that apply. Unliquidated Disputed Type of PRIORITY unsecured claim:	alle a constant de maquema conseguio sersi à versa avec.		***************************************
Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset? No Yes Priority Creditor's Name Number Street City State ZIP Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only	Contingent Unliquidated Disputed Type of PRIORITY unsecured claim: Domestic support obligations Taxes and certain other debts you owe the government Claims for death or personal injury while you were intoxicated Other. Specify Last 4 digits of account number When was the debt incurred? As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Disputed Type of PRIORITY unsecured claim: Domestic support obligations Taxes and certain other debts you owe the government Claims for death or personal injury while you were	alle a constant de maquema conseguio sersi à varra con	turnet andronen kenningan kenningan kenningan kenningan kenningan kenningan kenningan kenningan kenningan kenni S	

	Case 19-42048	Doc 1	Filed 07/08/19 Entered 0 Document Page 50 of	7/08/19 15 118	5:15:07	Desc Ma	ain
or 1	Brandon Allar		Case	e number (if known)			
	First Name Middle Name	Last Name	Continuation Page				
t 1:	Your PRIORITY Unse			d as forth	Total claim	Priority	Nonprior
r IIstin	ng any entries on this page	e, number them	beginning with 2.3, followed by 2.4, an	เฉ รูง เบเนเ.	TOTAL GIANT	amount	amount
						•	\$
			Last 4 digits of account number		\$	_ \$	_ Ф
Priority	Creditor's Name		When was the debt incurred?				
Numbe	or Street						
,,,,,,,,			As of the date you file, the claim is: Che	eck all that apply.			
			☐ Contingent				
City	State	ZIP Code	☐ Unliquidated				
City	State		☐ Disputed				
Who	incurred the debt? Check on	ie.					
O D	ebtor 1 only		Type of PRIORITY unsecured claim:				
	ebtor 2 only		□ Domestic support obligations				
	ebtor 1 and Debtor 2 only		Taxes and certain other debts you owe	the government			
☐ A	t least one of the debtors and a	nother	Claims for death or personal injury while	e you were			
Ос	check if this claim is for a co	mmunity debt	intoxicated Other. Specify				
			Cities. Opcomy				
Is the	e claim subject to offset?						
☐ N	lo						
☐ Y	es es	0.00 mg and a second of the se		enterprises and the control of the property of the control of the	naman pada sa a pada pada naman sa na	There was the first production of the constitution	
ANTA STELL NEEDS CO. M.	的复数人名英格兰 化二甲基甲基甲基甲基甲基甲基甲基甲基甲基甲基甲基甲基甲基甲基甲基甲基甲基甲基甲基		Last 4 digits of account number		\$	\$	_ \$
Data di	ty Creditor's Name		Last 4 digits of account number				
FIIOII	ty Creditor a Hamb		When was the debt incurred?				
Numb	ber Street						
			As of the date you file, the claim is: C	heck all that apply.			
			☐ Contingent				
City	State	ZIP Code	Unliquidated				
City			☐ Disputed				
Who	o incurred the debt? Check o	one.					
	Debtor 1 only		Type of PRIORITY unsecured clain	1;			
	Debtor 2 only		Domestic support obligations				
	Debtor 1 and Debtor 2 only		☐ Taxes and certain other debts you ow	e the government			
	At least one of the debtors and	another	 Claims for death or personal injury wh 	ile you were			
	Check if this claim is for a	community debt	intoxicated Other. Specify		_		
			— Other. Specify				
is t	he claim subject to offset?						
	No						and the second second second
		response to the contract of th					
			Last 4 digits of account number		\$	\$	\$
Prio	ority Creditor's Name						
	•		When was the debt incurred?				
Nun	mber Street		معاملات علام التعام	Check all that anni	v.		
			_ As of the date you file, the claim is:	Olicov all filat appi	<i>y</i> .		
			☐ Contingent				

	Debtor 1 only	
\Box	Debtor 2 only	

Who incurred the debt? Check one.

Debtor 1 and Debtor 2 only

At least one of the debtors and another

☐ Check if this claim is for a community debt

☐ No ☐ Yes

City

Type of PRIORITY unsecured claim:

☐ Taxes and certain other debts you owe the government

☐ Claims for death or personal injury while you were

■ Domestic support obligations

☐ Unliquidated

intoxicated

Other. Specify

□ Disputed

ZIP Code

State

		Case 19	-42048	Doc 1	Filed 07/08/ Document		Entered 07/08/19 15:15:07 Page 51 of 118	Desc Main
D l. 4		Brandon	Allan	Blas	sidell		· ·	
Debt	or 1	First Name	Middle Name	Last Nar		_	Case number (if known)	
Par	t 2:	List All of Yo	our NONPRI	ORITY Ur	secured Claims			
3. I	o an	y creditors have	nonpriority	unsecured	claims against you	?		
		. You have nothi	ng to report in	this part. S	ubmit this form to the	e cou	rt with your other schedules.	
į	☑ Ye	s						
<i>a</i> 1	ict all	l of your nameri	arity unegow	ad claime i	in the alphabetical	arda	of the creditor who holds each claim. If a	creditor has more than one
							each claim listed, identify what type of claim	
							e other creditors in Part 3.If you have more th	
(daims	fill out the Contin	nuation Page	of Part 2.				
								Total claim
								i otai ciaiiii
4.1						La	st 4 digits of account number	
	Nonpri	iority Creditor's Name				1877	nen was the debt incurred?	\$
						VVI	ien was the debt incurred?	
	Numbe	er Street						
							of the date you file, the claim is: Check all that	tannly
	City			State	ZIP Code	AS	of the date you me, the claim is. Oneck an that	арріу.
							Contingent	
	Who	incurred the deb	t? Check one.				Unliquidated	
	o 🚨	ebtor 1 only					Disputed	
	O D	ebtor 2 only						
	☐ D	ebtor 1 and Debtor	2 only			Ту	pe of NONPRIORITY unsecured claim:	
	□ A	t least one of the de	ebtors and anot	ner			Student loans	
		heck if this clain	is for a com	nunity deht			Obligations arising out of a separation agreement	or divorce
		HOUR II GIII GIBIII		y asst			that you did not report as priority claims	

			i otai ciaim
4.1	Nonpriority Creditor's Name	Last 4 digits of account number	\$
	Nonpriority Creditor's Name	When was the debt incurred?	
1	Number Street	_	ssss
	City State ZIP Code	As of the date you file, the claim is: Check all that apply.	
	Who incurred the debt? Check one. Debtor 1 only	□ Contingent□ Unliquidated□ Disputed	
1	Debtor 2 only Debtor 1 and Debtor 2 only	Type of NONPRIORITY unsecured claim:	:
	At least one of the debtors and another	☐ Student loans	
1	lacksquare Check if this claim is for a community debt	 Obligations arising out of a separation agreement or divorce that you did not report as priority claims 	: :
	Is the claim subject to offset? No Yes	Debts to pension or profit-sharing plans, and other similar debts Other. Specify	: : : :
4.2		Last 4 digits of account number	andrewing the control of the control
	Nonpriority Creditor's Name	When was the debt incurred?	
		_	
	Number Street	As of the date you file, the claim is: Check all that apply.	
į	City State ZIP Code	☐ Contingent	
ļ.	Who incurred the debt? Check one.	Unliquidated	
	Debtor 1 only	☐ Disputed	
	Debtor 2 only	Type of NONDRIODITY ungequeed eleims	
1	Debtor 1 and Debtor 2 only	Type of NONPRIORITY unsecured claim:	
	At least one of the debtors and another	Student loans	
	☐ Check if this claim is for a community debt	 Obligations arising out of a separation agreement or divorce that you did not report as priority claims 	
	Is the claim subject to offset? ☐ No ☐ Yes	Debts to pension or profit-sharing plans, and other similar debts Other. Specify	
4.3		Last 4 digits of account number	ernemanterii ah banamuud keltid di tistaalaan (h. 1997-tasiber) kesili ku
-	Nonpriority Creditor's Name	When was the debt incurred?	\$
	Number Street	— — — — — — — — — — — — — — — — — — —	
	City State ZIP Code	— As of the date you file, the claim is: Check all that apply.	
	·	☐ Contingent	
1	Who incurred the debt? Check one.	☐ Unliquidated	
:	Debtor 1 only	☐ Disputed	
	Debtor 2 only		
1	Debtor 1 and Debtor 2 only At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
i	At least one of the debtors and another	☐ Student loans	
	☐ Check if this claim is for a community debt	 Obligations arising out of a separation agreement or divorce that you did not report as priority claims 	
1	Is the claim subject to offset?	Debts to pension or profit-sharing plans, and other similar debts	
	□ No □ Yes	Other. Specify	

page	of	

Case 19-42048 Doc 1 Filed 07/08/19 Entered 07/08/19 15:15:07 Desc Main Page 52 of 118

Document

Debtor 1

Brandon

Allan Middle Name

Blasidell Last Name

sting any entries on this	page, number them begin	nning with 4.4,	followed by 4.5, and so forth.	Total claim
Carried and Annex				s 1,562.0
Evolv	ange		Last 4 digits of document	Φ
army/Air Force Excha	1190		When was the debt incurred? 12/01/2011	
Post Office Box 650	110			
umber Street		265	As of the date you file, the claim is: Check all that apply.	
Dallas	174		☐ Contingent	
ity	State ZIP C	000	☑ Unliquidated	
Vho incurred the debt? Ch	eck one.		☐ Disputed	
Debtor 1 only			and a second claim	
Debtor 2 only			Type of NONPRIORITY unsecured claim:	
Debtor 1 and Debtor 2 only	1		Student loans	
At least one of the debtors	and another		Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
Check if this claim is fo	or a community debt		Debts to pension or profit-sharing plans, and other similar debts	
			☑ Other. Specify	
Is the claim subject to offs	E11			
☑ No ☑ Yes				the factors and constitutions of a special scale and the security of
attind by the second standards or mined times that we stalk to read the test of the second second second times		والمنافعة	Last 4 digits of account number 0 0 1 2	\$ <u>1,316</u>
Army /Air Force Ex	change		00/00/000	
Nonpriority Creditor's Name			When was the debt incurred?	
Post Office Box 65	50410		As of the date you file, the claim is: Check all that apply.	
Number Street		5265	As of the date you me, the claim ter should be	
Dallas		Code	Contingent	
City			Unliquidated	
Who incurred the debt?	Check one.		☐ Disputed	
☑ Debtor 1 only			Type of NONPRIORITY unsecured claim:	
Debtor 2 only	L.		C Student loans	
☐ Debtor 1 and Debtor 2 o	nly are and another		Obligations arising out of a separation agreement or divorce that	
			Jid not conort as DIIDDIV (181105	
☐ Check if this claim is	for a community debt		☐ Debts to pension or profit-sharing plans, and other similar debts ☐ Other. Specify Credit	
Is the claim subject to o	ffset?		Other. Specify Credit	
∑ No				
Yes		makannan garjaga kiji kataka kata kija a salaman		_{\$_} 1,12
· · · · · · · · · · · · · · · · · · ·			Last 4 digits of account number	*
Security Credit se	rvices		04/00/0040	
Nonpriority Creditor's Name			When was the debt incurred? 01/02/2019	
306 Enterprise Dri	ve		As of the date you file, the claim is: Check all that apply.	
Number Street	MS	38658		
Oxford		ZIP Code	Contingent	
•			☑ Unliquidated	
Who incurred the debt	? Check one.		☐ Disputed	
■ Debtor 1 only			Type of NONPRIORITY unsecured claim:	
Debtor 2 only			Ctudent leans	
Debtor 1 and Debtor 2	only		Obligations arising out of a separation agreement or divorce th	at
At least one of the de			and report as priority claims	
Check if this claim	is for a community debt		Debts to pension or profit-sharing plans, and other similar debi	
Is the claim subject to			Other. Specify Collection	

Case 19-42048 Doc 1

Filed 07/08/19 Document

Entered 07/08/19 15:15:07 Desc Main Page 53 of 118

Debtor 1

Brandon First Name

Allan Middle Name

Blasidell

Case number (if known)

List Others to Be Notified About a Debt That You Already Listed

e this page only if you have others to be notified about y ample, if a collection agency is trying to collect from you then list the collection agency here. Similarly, if you have ditional creditors here. If you do not have additional persor	our bankruptcy, for a debt that you already listed in Parts 1 or 2. For for a debt you owe to someone else, list the original creditor in Parts 1 or more than one creditor for any of the debts that you listed in Parts 1 or 2, list the set to be notified for any debts in Parts 1 or 2, do not fill out or submit this page.
umonu ordanora	On which entry in Part 1 or Part 2 did you list the original creditor?
Name	Line of (Check one): Part 1: Creditors with Priority Unsecured Claims
Number Street	Part 2: Creditors with Nonpriority Unsecured Claim
Number.	Last 4 digits of account number
State ZIP Code	
City State ZIP Code	On which entry in Part 1 or Part 2 did you list the original creditor?
Name	Line of (Check one): Part 1: Creditors with Priority Unsecured Claims
Number Street	Part 2: Creditors with Nonpriority Unsecured
	Last 4 digits of account number
City State ZIP Code	
	On which entry in Part 1 or Part 2 did you list the original creditor?
Name	Line of (Check one): Part 1: Creditors with Priority Unsecured Claims
Number Street	Part 2: Creditors with Nonpriority Unsecured
Rumos	Claims
	Last 4 digits of account number
City State ZIP Code	On which entry in Part 1 or Part 2 did you list the original creditor?
Name	Line of (Check one): Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured
Number Street	Claims
	Last 4 digits of account number
City State ZIP Code	On which entry in Part 1 or Part 2 did you list the original creditor?
Name	Line of (Check one): Part 1: Creditors with Priority Unsecured Claim
Number Street	Part 2: Creditors with Nonpriority Unsecured Claims
	Last 4 digits of account number
City State ZIP Code	On which entry in Part 1 or Part 2 did you list the original creditor?
Name	-
Ngure	Line of (Check one): Part 1: Creditors with Priority Unsecured Clain - Part 2: Creditors with Nonpriority Unsecured
Number Street	Claims
	Last 4 digits of account number
City State ZIP Code representation of the control o	On which entry in Part 1 or Part 2 did you list the original creditor?
Name	Line of (Check one): Part 1: Creditors with Priority Unsecured Clair
Number Street	Part 2: Creditors with Nonpriority Unsecured Claims
	Last 4 digits of account number

Case 19-42048 Doc 1 Filed 07/08/19 Desc Main Entered 07/08/19 15:15:07 Page 54 of 118

Document

Debtor 1

Brandon First Name

Allan Middle Name

Blasidell Last Name

Case number (if known)_

Part 4:

Add the Amounts for Each Type of Unsecured Claim

Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. § 159.
 Add the amounts for each type of unsecured claim.

			Total claim
Total claims	6a. Domestic support obligations	6a.	\$
from Part 1	6b. Taxes and certain other debts you owe the government	6b.	\$
	6c. Claims for death or personal injury while you were intoxicated	6c.	\$
	 Other. Add all other priority unsecured claims. Write that amount here. 	6d.	+ \$
	6e. Total . Add lines 6a through 6d.	6e.	\$
			Total claim
Total claims	6f. Student loans	6f.	\$
from Part 2	6g. Obligations arising out of a separation agreement or divorce that you did not report as priority claims	6g.	\$
	6h. Debts to pension or profit-sharing plans, and other similar debts	6h.	\$
	Other. Add all other nonpriority unsecured claims. Write that amount here.	6i.	+ \$
	6j. Total . Add lines 6f through 6i.	6j.	\$

Case 19-42048 Doc 1 Filed 07/08/19 Entered 07/08/19 15:15:07 Desc Main Document Page 55 of 118

Fill in this	information to identif	y your case:		
Debtor 1	Brandon First Name	Allan Middle Name	Blaisdell Last Name	
Debtor 2 (Spouse, if filir	ng) First Name	Middle Name	Last Name	
United State	es Bankruptcy Court for th	e: Distri	ict of	
Case number (If known)	er			

Official Form 106E/F

Schedule E/F: Creditors Who Have Unsecured Claims

12/15

Be as complete and accurate as possible. Use Part 1 for creditors with PRIORITY claims and Part 2 for creditors with NONPRIORITY claims. List the other party to any executory contracts or unexpired leases that could result in a claim. Also list executory contracts on Schedule A/B: Property (Official Form 106A/B) and on Schedule G: Executory Contracts and Unexpired Leases (Official Form 106G). Do not include any creditors with partially secured claims that are listed in Schedule D: Creditors Who Have Claims Secured by Property. If more space is needed, copy the Part you need, fill it out, number the entries in the boxes on the left. Attach the Continuation Page to this page. On the top of any additional pages, write your name and case number (if known).

Part	1: List All of Your PRIORITY Unsecured	l Claims			!
2. Li ea	ob claim listed identity what type of claim it is. If a	ditor has more than one priority unsecured claim, list the claim has both priority and nonpriority amounts, list that aims in alphabetical order according to the creditor's nate of the particular claim, art 1, if more than one creditor holds a particular claim,	me If you have	e more than tV	t 3.
(F	or an explanation of each type of claim, see the mi		Total claim	Priority amount	Nonpriority amount
2.1	- 0-1 N	Last 4 digits of account number	\$. \$	\$
	Priority Creditor's Name Number Street	When was the debt incurred?			
	Number Street City State 7IP Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset? No Yes	As of the date you file, the claim is: Check all that apply Contingent Unliquidated Disputed Type of PRIORITY unsecured claim: Domestic support obligations Taxes and certain other debts you owe the government Claims for death or personal injury while you were intoxicated Other. Specify			ell y man greed opposition had all deposits by the specific of
2.2	Priority Creditor's Name	Last 4 digits of account number When was the debt incurred?	\$	\$	<u> </u>
entre de la companya	Number Street City State ZIP Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset? No Yes	As of the date you file, the claim is: Check all that app Contingent Unliquidated Disputed Type of PRIORITY unsecured claim: Domestic support obligations Taxes and certain other debts you owe the government Claims for death or personal injury while you were intoxicated Other. Specify	ıt		

Case 19-42048 Doc 1

Document

Page 56 of 118

Debtor 1

Allan

Middle Name

Last Name

Blaisdell

Your PRIORITY Unsecured Claims –	eginning with 2.3, followed by 2.4, and so forth.	Total claim	Priority amount	Nonpriori amount
		¢	\$	\$
	Last 4 digits of account number	\$	_ Ψ	
Priority Creditor's Name	When was the debt incurred?			
Number Street	As of the date you file, the claim is: Check all that apply.			
	☐ Contingent ☐ Unliquidated			
City State ZIP Code	Disputed			
Who incurred the debt? Check one.	- Propiety and control claim;			
Debtor 1 only	Type of PRIORITY unsecured claim:			
☐ Debtor 2 only	☐ Domestic support obligations			
Debtor 1 and Debtor 2 only	☐ Taxes and certain other debts you owe the government			
At least one of the debtors and another	Claims for death or personal injury while you were intoxicated			
☐ Check if this claim is for a community debt	Other. Specify			
Is the claim subject to offset?				
□ No				
Yes			 Semination of a seminated states of again. 	-grant agreed, the made for experience of
Salahan Salaha	Last 4 digits of account number	\$	\$	\$
Priority Creditor's Name	When was the debt incurred?			
Number Street	As of the date you file, the claim is: Check all that apply	y .		
	☐ Contingent			
City State ZIP Code	☐ Unliquidated			
City State 211 Gods	☐ Disputed			
Who incurred the debt? Check one.				
Debtor 1 only	Type of PRIORITY unsecured claim:			
Debtor 2 only	Domestic support obligations			
Debtor 1 and Debtor 2 only	☐ Taxes and certain other debts you owe the governmen	· ·		
At least one of the debtors and another	Claims for death or personal injury while you were			
Check if this claim is for a community debt	intoxicated Other. Specify			
Is the claim subject to offset?				
Is the claim subject to onset: ☐ No				
Yes			anateur emilie erae aren Aren (establik	
	Last 4 digits of account number	\$	\$	\$
Priority Creditor's Name	When was the debt incurred?			
Number Street		mly:		
	As of the date you file, the claim is: Check all that ap	իւֆ.		
	Contingent			
City State ZIP Code	☐ Unliquidated☐ · Disputed			
Who incurred the debt? Check one.	·			
Debtor 1 only	Type of PRIORITY unsecured claim:			
Debtor 2 only	Domestic support obligations			
Debtor 1 and Debtor 2 only	Taxes and certain other debts you owe the government	ent		
At least one of the debtors and another	☐ Claims for death or personal injury while you were		and the second s	of the second of the second
☐ Check if this claim is for a community deb	intovicated	Commission (States and 1970)		
	😐 Otter. Specify			
Is the claim subject to offset?				
□ No				
Yes				

Case 19-42048 Filed 07/08/19 Entered 07/08/19 15:15:07 Doc 1

Document Blaisdell

Page 57 of 118

Desc Main

Debtor 1

Brandon First Name

Allan

btor 1	First Name Middle Name Last Name		
art 2:	List All of Your NONPRIORITY Unsect	ured Claims	
	" have nonpriority unsecured claim	ns against you	?
∏ i	No. You have nothing to report in this part. Submit	this form to the	e court with your other schedules.
I A v			
non	priority unsecured claim, list the creditor separated	e alphabetical y for each clair articular claim,	order of the creditor who holds each claim. If a creditor has more than one n. For each claim listed, identify what type of claim it is. Do not list claims already list the other creditors in Part 3.If you have more than three nonpriority unsecured
clair	ns fill out the Continuation Page of Part 2.		Total claim
٦ _F	SNB NA		Last 4 digits of account number 4 6 3 3 3 \$ 543.00
	onpriority Creditor's Name		When was the debt incurred? $\frac{12/01/2012}{12/01/2012}$
	ost Office Box 33009		-
	imber Street t. Sill OK	73503	As of the date you file, the claim is: Check all that apply.
CI	Ctato	ZIP Code	
			☐ Contingent ☑ Unliquidated
V	Ino incurred the debt? Check one.		Disputed
	Debtor 1 only		
	Debtor 2 only Debtor 1 and Debtor 2 only		Type of NONPRIORITY unsecured claim:
<u>.</u>	At least one of the debtors and another		☐ Student loans
	Check if this claim is for a community debt		Obligations arising out of a separation agreement or divorce that you did not report as priority claims
			Debts to pension or profit-sharing plans, and other similar debts
	s the claim subject to offset? 7 1 No		Other. Specify
	☑ Yes		
		ngang a pepaganan mengapan penangan andar s	Last 4 digits of account number 3 3 9 0 \$ 5,521.00
.2	U.S. Department of Education		When was the debt incurred? 10/26/2006
	Nonpriority Creditor's Name		
	61 Forsyth ST. SW 19T40		As of the date you file, the claim is: Check all that apply.
	Atlanta Ga	30303	
	City State	ZIP Code	☐ Contingent ☐ Unliquidated
	Who incurred the debt? Check one.		Disputed
	Debtor 1 only		·
	Debtor 2 only		Type of NONPRIORITY unsecured claim:
	Debtor 1 and Debtor 2 onlyAt least one of the debtors and another		Student loans
			Obligations arising out of a separation agreement or divorce that you did not report as priority claims
	☐ Check if this claim is for a community debt		Debts to pension or profit-sharing plans, and other similar debts
	Is the claim subject to offset?		Other. Specify
	☑ No ☐ Yes		
1.5	to the first of the control of the c	ann ag garaga ang pag ana ar an ma' a ga ga an ar an a ga an ar a an ar a a a a a an ar a a a a	Last 4 digits of account number 3 3 9 0 \$ 7,880.
4.3	U.S. Department of Education Nonpriority Creditor's Name		When was the debt incurred? 10/26/2006
	61 Forsyth St. SW 19T40		
1	Number Street Atlanta GA	30303	As of the date you file, the claim is: Check all that apply.
	City State	ZIP Code	☐ Contingent
	Who incurred the debt? Check one.		☑ Conlingerii ☑ Unliquidated
	Debtor 1 only		☐ Disputed
	Debtor 2 only		
i .	Debtor 1 and Debtor 2 only		Type of NONPRIORITY unsecured claim:
1	☐ At least one of the debtors and another		Student loansObligations arising out of a separation agreement or divorce
	Check if this claim is for a community debt		that you did not report as priority claims
1	Is the claim subject to offset?		Debts to pension or profit-sharing plans, and other similar debts
	☑ No ☐ Yes		Other. Specify

Case 19-42048

Document

Doc 1 Filed 07/08/19 Entered 07/08/19 15:15:07 Desc Main Page 58 of 118

Blaisdell

Debtor 1

Brandon First Name

Allan

Middle Name

Case number (if known)_

NEDIODITY Unsecured Claims — Continuation Page

listing any entries on this	page, number them beginning	g with 4.4, followed by 4.5, and so forth.	Total claim
			_{\$} 7,222.0
U.S. Dept. of ED/Gles	i	Last 4 digits of account number 6 7 9 6	\$ 1,222.0
Nonpriority Creditor's Name		When was the debt incurred? 01/31/2018	
Post Office Box 7860			
Number Street		As of the date you file, the claim is: Check all that apply.	
Madison	WI 53707 State ZIP Code	Contingent	
City	State Zii Cooc	☑ Unliquidated	
Who incurred the debt? Che	ck one.	☐ Disputed	
Debtor 1 only		and the state of t	
Debtor 2 only		Type of NONPRIORITY unsecured claim:	
Debtor 1 and Debtor 2 only		Student loans	
At least one of the debtors a	and another	Obligations arising out of a separation agreement or divorce that	
		you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts	
lacksquare Check if this claim is for			
Is the claim subject to offse	et?	Other. Specify	
☑ No			
Yes	والمقاوم واستعمادها والمساوع والمساوعة والمتعاومة والمتعاومة والمتعاومة والمتعاومة والمتعاومة والمتعاومة والمتعاومة		2027
		Last 4 digits of account number	\$ 7,977
Military Star		11/21/2011	
Nonpriority Creditor's Name	•	When was the debt incurred? 11/21/2011	
3911 Walton Walker		As of the date you file, the claim is: Check all that apply.	
Dallas	TX 7526	6	
City	State ZIP Code	Contingent	
•		Unliquidated	
Who incurred the debt? Ch	neck one.	☐ Disputed	
Debtor 1 only		Type of NONPRIORITY unsecured claim:	
Debtor 2 only			
Debtor 1 and Debtor 2 onl		Student loansObligations arising out of a separation agreement or divorce that	t
At least one of the debtors		you did not report as priority claims	
Check if this claim is fo	or a community debt	Debts to pension or profit-sharing plans, and other similar debts	;
is the claim subject to offs		other. Specify Credit	
☑ No ☐ Yes			enterior en
and within the America Security Securit	and a time to the entire in the registerable and the entire and th	Last 4 digits of account number	_{\$} 4,98
Military Star		44/00/0014	
Nonpriority Creditor's Name		When was the debt incurred? 11/20/2011	
3911 Walton Walke	r	and the state of t	
Number Street	TX 752	As of the date you file, the claim is: Check all that apply.	
Dallas	State ZIP Cod		
City		☑ Unliquidated	
Who incurred the debt?	Check one.	☐ Disputed	
Debtor 1 only		and the second s	
Debtor 2 only		Type of NONPRIORITY unsecured claim:	
Debtor 1 and Debtor 2 o	nly	☐ Student loans	4
At least one of the debto	ors and another	Obligations arising out of a separation agreement or divorce the	าสเ
☐ Check if this claim is		you did not report as priority claims Debts to pension or profit-sharing plans, and other similar deb	ts
Is the claim subject to of		Other. Specify Credit	
v ÍNo □ Yes			
244 1 1			

Case 19-42048

Doc 1

Filed 07/08/19

Entered 07/08/19 15:15:07

Desc Main

Document

Page 59 of 118

Debtor 1

Brandon First Name

Middle Name

Biaisdell Allan

Case number (if known)_

Part 3:

List Others to Be Notified About a Debt That You Already Listed

5. Use this page only if you have others to be notified about your bankruptcy, for a debt that you already listed in Parts 1 or 2. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the original creditor in Parts 1 or 2, then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Parts 1 or 2, list the additional creditors here. If you do not have additional persons to be notified for any debts in Parts 1 or 2, do not fill out or submit this page.

		_	On which entry in Part 1 or Part 2 did you list the original creditor?
lame			Line of (Check one): Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims
lumber	Street		
			Last 4 digits of account number
City	a produce de la companya de la compa	State ZIP Code	On which entry in Part 1 or Part 2 did you list the original creditor?
Name			Line of (Check one): Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured
Number	Street		Claims
0.1.		State ZIP Code	Last 4 digits of account number
City	essentiana and este english services en entres tente and and entre entre entre entre entre entre entre entre e	والمعارضة والمعا	On which entry in Part 1 or Part 2 did you list the original creditor?
Name			Line of (Check one): Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured
Number	Street		Claims
		710 0-4	Last 4 digits of account number
City		State ZIP Code	On which entry in Part 1 or Part 2 did you list the original creditor?
Name			Line of (Check one): Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured
Number	Street		Claims
City		State ZIP Code	Last 4 digits of account number
City			On which entry in Part 1 or Part 2 did you list the original creditor?
Name	Street		Line of (Check one): Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured
Number	Street		Claims
Ciby		State ZIP Code	Last 4 digits of account number
City	en de la companya de la calegra que esta companya de calegra de calegra de la calegra de la constitución de ca		On which entry in Part 1 or Part 2 did you list the original creditor?
Name			Line of (Check one): Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured
Number	Street		Claims -
City		State ZIP Code	Last 4 digits of account number
City			On which entry in Part 1 or Part 2 did you list the original creditor?
Name			Line of (Check one): Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured
Number	Street		_ Claims
City		State ZIP Code	Last 4 digits of account number

Case 19-42048

Middle Name

Doc 1

Filed 07/08/19 Document

Entered 07/08/19 15:15:07 Desc Main Page 60 of 118

Debtor 1

Brandon First Name

Allan

Blaisdell

Case number (if known)_

Part 4:

Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. § 159. Add the amounts for each type of unsecured claim.

			Total claim
Total claims	6a. Domestic support obligations	6a.	\$
from Part 1	6b. Taxes and certain other debts you owe the government		\$
	 Claims for death or personal injury while you were intoxicated 	6c.	\$
	6d. Other. Add all other priority unsecured claims. Write that amount here.	6d.	+ \$
	6e. Total . Add lines 6a through 6d.	6e.	\$
			Total clalm
Total claims		6f.	
	6f. Student loans	0. .	\$
from Part 2	6f. Student loans 6g. Obligations arising out of a separation agreement or divorce that you did not report as priority claims	6g.	\$
	6g. Obligations arising out of a separation agreement or divorce that you did not report as priority	-	\$\$ \$
	 6g. Obligations arising out of a separation agreement or divorce that you did not report as priority claims 6h. Debts to pension or profit-sharing plans, and other 	6g.	\$
	 6g. Obligations arising out of a separation agreement or divorce that you did not report as priority claims 6h. Debts to pension or profit-sharing plans, and other similar debts 6i. Other, Add all other nonpriority unsecured claims. 	6g. 6h.	\$ \$

Case 19-42048 Doc 1 Filed 07/08/19 Entered 07/08/19 15:15:07 Desc Main Document Page 61 of 118

Fill in this i	information to i	dentify your c	ase:		
Debtor 1	Brandon First Name	Allan Midd	Blasidell Name	Last Name	
Debtor 2 (Spouse, if filin	ng) First Name	Midd	lle Name	Last Name	
United State	s Bankruptcy Court	t for the:	. District of		
Case numbe	er				

Official Form 106E/F

Schedule E/F: Creditors Who Have Unsecured Claims

12/15

Be as complete and accurate as possible. Use Part 1 for creditors with PRIORITY claims and Part 2 for creditors with NONPRIORITY claims. List the other party to any executory contracts or unexpired leases that could result in a claim. Also list executory contracts on Schedule A/B: Property (Official Form 106A/B) and on Schedule G: Executory Contracts and Unexpired Leases (Official Form 106G). Do not include any creditors with partially secured claims that are listed in Schedule D: Creditors Who Have Claims Secured by Property. If more space is needed, copy the Part you need, fill it out, number the entries in the boxes on the left. Attach the Continuation Page to this page. On the top of any additional pages, write your name and case number (if known).

Pai	t 1: List All of Your PRIORITY Unsecured	l Claims			
1.	Do any creditors have priority unsecured claims	against you?			
	No. Go to Part 2.				
					olaim For
2.	List all of your priority unsecured claims. If a cree each claim listed, identify what type of claim it is. If a nonpriority amounts. As much as possible, list the claim is the claim of Page of P	ditor has more than one priority unsecured claim, list the claim has both priority and nonpriority amounts, list that aims in alphabetical order according to the creditor's nate art 1. If more than one creditor holds a particular claim,	mo If you have	- more than tV	vo briority
	(For an explanation of each type of claim, see the in	structions for this form in the instruction bookies.	Total claim	Priority amount	Nonpriority amount
2.1		Last 4 digits of account number	\$	_ \$	\$
	Priority Creditor's Name	When was the debt incurred?			:
	Number Street	As of the date you file, the claim is: Check all that apply			
	7100-1-	☐ Contingent			
1	City State 7IP Code	☐ Unliquidated			
	Who incurred the debt? Check one. Debtor 1 only	☐ Disputed			
	Debtor 2 only	Type of PRIORITY unsecured claim:			
	Debtor 1 and Debtor 2 only	Domestic support obligations			
	At least one of the debtors and another	Taxes and certain other debts you owe the government			
	☐ Check if this claim is for a community debt	 Claims for death or personal injury while you were intoxicated 			
i i	Is the claim subject to offset?	Other. Specify	_		
1	□ No			en en part etter de se entre france et en en entre france et en	en eg engal lighte en eg mant en til en av helde til en a glevelik en en til en en til
_	Yes a value typik kepitaning kampuna kanganga kanganga sa kili kempangangan kepitah berahan kempangangan kempangan k	magnetische Leder basser der Seite vom der geste Schausser der der einer Schausser vom der der eine Schausser der der einer der der einer der der der der der der der der der d		¢	\$
2.2		Last 4 digits of account number	\$	Ψ	
	Priority Creditor's Name	When was the debt incurred?			
	Number Street	As of the date you file, the claim is: Check all that appl	y.		
		Contingent			
	City State ZIP Code	Unliquidated			
	Who incurred the debt? Check one.	☐ Disputed			
	Debtor 1 only	Type of PRIORITY unsecured claim:			
1	Debtor 2 only	☐ Domestic support obligations			
	Debtor 1 and Debtor 2 only	☐ Taxes and certain other debts you owe the governmen	t		
	At least one of the debtors and another	Claims for death or personal injury while you were			
	Check if this claim is for a community debt	intoxicated			
	Is the claim subject to offset? ☐ No ☐ Yes	Other. Specify	_		

Case 19-42048 Doc 1 Filed 07/08/19 Entered 07/08/19 15:15:07 Desc Main

Document Page 62 of 118 Case number (if known)_

1: Your PRIORITY Unsecured Claims -	peginning with 2.3, followed by 2.4, and so forth.	Total claim	Priority amount	Nonpriority amount
	Last 4 digits of account number	\$	\$	\$
Priority Creditor's Name	When was the debt incurred?			
Number Street	As of the date you file, the claim is: Check all that apply.			
	☐ Contingent			
City State ZIP Code	☐ Unliquidated			
City	☐ Disputed			
Who incurred the debt? Check one.	Type of PRIORITY unsecured claim:			
Debtor 1 only Debtor 2 only	☐ Domestic support obligations			
Debtor 1 and Debtor 2 only	Taxes and certain other debts you owe the government			
☐ At least one of the debtors and another	Claims for death or personal injury while you were			
☐ Check if this claim is for a community debt	intoxicated Other. Specify			
Is the claim subject to offset?				
□ No				
Yes		enter entertain de la contraction (q. 1.)	aka sahakan di arah mila senarah pinjana saran sa sasar sarih	
	Last 4 digits of account number	\$	\$	\$
Priority Creditor's Name				
Chart	When was the debt incurred?			
Number Street	As of the date you file, the claim is: Check all that apply			
	☐ Contingent			
City State ZIP Code	Unliquidated			
•	☐ Disputed			
Who incurred the debt? Check one. Debtor 1 only	Type of PRIORITY unsecured claim:			
Debtor 2 only	Domestic support obligations			
Debtor 1 and Debtor 2 only	Taxes and certain other debts you owe the government			
At least one of the debtors and another	Claims for death or personal injury while you were intoxicated			
Check if this claim is for a community debt	Other. Specify	-		
Is the claim subject to offset?				
D Na				
				Manager of the State of the Sta
<u> </u>	Last 4 digits of account number	\$	\$	\$
Priority Creditor's Name	When was the debt incurred?			
Number Street	-	h		
	As of the date you file, the claim is: Check all that app	ly.		
	Contingent			
City State ZIP Code	Unliquidated Disputed			
Who incurred the debt? Check one.				
Debtor 1 only	Type of PRIORITY unsecured claim:			
Debtor 2 only	Domestic support obligations			
Debtor 1 and Debtor 2 onlyAt least one of the debtors and another	☐ Taxes and certain other debts you owe the government ☐ Claims for death or personal injury while you were	IL.		
Check if this claim is for a community debt	intoxicated	$\overline{\mathcal{M}} \sim 2 \pi d d \sigma^{\alpha} d \sin \theta \cos \theta \sin \theta \cos \theta$	en egene græg en eng en gy skrægt (grænette et tjente ett	proceedings of the state of the
L Charletine claim is for a community ucut	Other. Specify			

Case 19-42048 Doc 1 Filed 07/08/19 Entered 07/08/19 15:15:07 Desc Main

Document

Page 63 of 118

Debtor	1

Brandon First Name

Allan

Blasidell Last Name

Case number (if known)_

art :	List All of Your NONPRIORI	TY Unse	cured Claims			
. Do	any creditors have nonpriority unse	cured cla	ims against you	u?		
Lis no	Yes	laims in t or separa or holds a	he alphabetical	order of the creditor who holds each claim. If a creditor has m m. For each claim listed, identify what type of claim it is. Do not lis list the other creditors in Part 3.If you have more than three nonp	nore that st claims priority u	nsecured
7,	Frontier Communications			Last 4 digits of account number \$		234.51
	Nonpriority Creditor's Name Post Office Box 5157			When was the debt incurred? 05/04/2018		
Ī	Number Street Tampa	FL	33675 ZIP Code	As of the date you file, the claim is: Check all that apply.		
	Who incurred the debt? Check one. Debtor 1 only	State	ZIP Code	☐ Contingent ☑ Unliquidated ☐ Disputed		
	Debtor 2 only Debtor 2 and Debtor 2 only At least one of the debtors and another			Type of NONPRIORITY unsecured claim: Student loans		
	☐ Check if this claim is for a commun is the claim subject to offset? ☐ No	ity debt		 Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Other. Specify		
.2	Nonpriority Creditor's Name			Last 4 digits of account number When was the debt incurred? 03/05/2016	\$	659.35
	1105 Kelly Drive Number Street Sanford	NC State	27330 ZIP Code	As of the date you file, the claim is: Check all that apply.		,
	Who incurred the debt? Check one. Debtor 1 only	State	ZII Gode	☐ Contingent☐ Unliquidated☐ Disputed☐		
	☑ Debtor 2 only ☐ Debtor 1 and Debtor 2 only			Type of NONPRIORITY unsecured claim:		
	At least one of the debtors and another			 Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims 		
	☐ Check if this claim is for a commu Is the claim subject to offset? ☑ No ☐ Yes	mity debi		Debts to pension or profit-sharing plans, and other similar debts Other. Specify	gave remoderate plane at 150 km (* 1505).	the way of the manufacture and the state of the section and th
4.3	Complete payment Recovery Nonpriority Creditor's Name Post Office Box 30184	y Servic	es	Last 4 digits of account number	\$	245.34
	Number Street Tampa	FI	33630 ZIP Code	As of the date you file, the claim is: Check all that apply.		
	Who incurred the debt? Check one. Debtor 1 only	State	ZIP Code	☐ Contingent ☐ Unliquidated ☐ Disputed		
	☐ Debtor 2 only ☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and anothe			Type of NONPRIORITY unsecured claim: ☐ Student loans ☐ Obligations arising out of a separation agreement or divorce		
	☐ Check if this claim is for a comm Is the claim subject to offset?	unity debi	•	that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debt Other Specify Collection	ts 	

Yes

Case 19-42048 Doc 1 Filed 07/08/19 Entered 07/08/19 15:15:07 Desc Main Document

Page 64 of 118

Debtor 1

Brandon First Name

Allan

Blasidell

Da	-4	9.
s a		

isting any entries on this page, number them beginni	ng with 4.4, followed by 4.5, and so forth.	Total claim
	Last 4 digits of account number	\$ 1,244.1°
Fayetteville State University oppriority Creditor's Name	04/00/0043	
200 Murchison Rd	When was the debt incurred:	
lumber Street	As of the date you file, the claim is: Check all that apply.	
Fayetteville NC 2830 State ZIP Code	Contingent	
•	☑ Unliquidated	
Who incurred the debt? Check one.	Disputed	
Debtor 1 only	Type of NONPRIORITY unsecured claim:	
☑ Debtor 2 only ☑ Debtor 1 and Debtor 2 only	☑ Student loans	
At least one of the debtors and another	Obligations arising out of a separation agreement or divorce that	
	you did not report as priority claims	
Check if this claim is for a community debt	Debts to pension or profit-sharing plans, and other similar debtsOther. Specify	
s the claim subject to offset?	Unter: Specify	
MÍNo DiYes		
res		the title of section of the section
	Last 4 digits of account number 2 0 0 2	\$ 2,172.
AAFES/ Military Star		<u> </u>
Nonpriority Creditor's Name	When was the debt incurred? 02/09/2008	
55 Second Street Suite 300	As of the date you file, the claim is: Check all that apply.	
Number Street San Franciso CA 941	As of the date you file, the claim is: ભારત તા પાતા ભાગા ગુરુ	
City State ZIP Cod		
Who incurred the debt? Check one.	☑ Unliquidated ☐ Disputed	
Debtor 1 only	,	
Debtor 1 only Debtor 2 only	Type of NONPRIORITY unsecured claim:	
Debtor 1 and Debtor 2 only	☐ Student loans	
At least one of the debtors and another	 Obligations arising out of a separation agreement or divorce that you did not report as priority claims 	
☐ Check if this claim is for a community debt	you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts	
Is the claim subject to offset?	✓ Other. Specify Credit	
M No		
Yes		
		_{\$} 1,851
AAEES/ Militany Star	Last 4 digits of account number 3 0 0 2	
AAFES/ Military Star Nonpriority Creditor's Name	When was the debt incurred? 12/02/2011	
55 Second Street Suite 300	Mileti Map rite dent utantions	
Number Street	As of the date you file, the claim is: Check all that apply.	
Sali Fial ICISO		
City	☑ Unliquidated	
Who incurred the debt? Check one.	☐ Disputed	
Debtor 1 only	Type of NONPRIORITY unsecured claim:	
Debtor 2 only	Student loans	
 □ Debtor 1 and Debtor 2 only □ At least one of the debtors and another 	Obligations arising out of a separation agreement or divorce that	t
	you did not report as priority claims	
☐ Check if this claim is for a community debt	 □ Debts to pension or profit-sharing plans, and other similar debts □ Other. Specify Credit 	
Is the claim subject to offset?	our other specify of our	

Case 19-42048 Doc 1 Filed 07/08/19 Entered 07/08/19 15:15:07 Desc Main Document Page 65 of 118

Debtor 1

Brandon First Name

Allan

Blasidell

Page 65 of 1

Case number (if known)_

Part 3:

List Others to Be Notified About a Debt That You Already Listed

	On which entry in Part 1 or Part 2 did you list the original creditor?
lame	Line of (Check one): Part 1: Creditors with Priority Unsecured Claims
umber Street	Part 2: Creditors with Nonpriority Unsecured Claim
lumber Street	Fait 2. Ofeditors with Nonpholity Gliboodica dia.
	Last 4 digits of account number
City State ZIP Code	and the second of the second o
	On which entry in Part 1 or Part 2 did you list the original creditor?
Name	Line of (Check one): Part 1: Creditors with Priority Unsecured Claims
Number Street	☐ Part 2: Creditors with Nonpriority Unsecured
	Claims
	Last 4 digits of account number
City State ZIP Code	
	On which entry in Part 1 or Part 2 did you list the original creditor?
Name	Line of (Check one): Part 1: Creditors with Priority Unsecured Claims
Number Street	☐ Part 2: Creditors with Nonpriority Unsecured
	Claims
	Last 4 digits of account number
City State ZIP Code	On which entry in Part 1 or Part 2 did you list the original creditor?
Name	On which entry in Part 1 of Part 2 did you list the original creditor:
	Line of (Check one): Part 1: Creditors with Priority Unsecured Claims
Number Street	Part 2: Creditors with Nonpriority Unsecured Claims
	Glaims
City State ZIP Code	Last 4 digits of account number
The second of th	On which entry in Part 1 or Part 2 did you list the original creditor?
Name	•
	Line of (Check one): Part 1: Creditors with Priority Unsecured Claims
Number Street	☐ Part 2: Creditors with Nonpriority Unsecured Claims
City State ZIP Code	Last 4 digits of account number
	On which entry in Part 1 or Part 2 did you list the original creditor?
Name	Line of (Check one): Part 1: Creditors with Priority Unsecured Claims
Number Street	Part 2: Creditors with Nonpriority Unsecured
	Claims
	Last 4 digits of account number
City State ZIP Code	
Name	On which entry in Part 1 or Part 2 did you list the original creditor?
Name	Line of (Check one): Part 1: Creditors with Priority Unsecured Claim
Number Street	Part 2: Creditors with Nonpriority Unsecured
	Claims
	Last 4 digits of account number
City State ZIP Code	Ends : digital at seasons the

Case 19-42048 Doc 1 Filed 07/08/19 Entered 07/08/19 15:15:07 Desc Main Document Page 66 of 118

Debtor 1

Brandon First Name

Allan

Blasidell Last Name

Case number (if known)_

Part 4:

Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. § 159. Add the amounts for each type of unsecured claim.

		Total claim
Total claims	6a. Domestic support obligations	6a. \$
from Part 1	6b. Taxes and certain other debts you owe the government	6b. <u>\$</u>
	Claims for death or personal injury while you were intoxicated	6c. <u>\$</u>
	 Other. Add all other priority unsecured claims. Write that amount here. 	6d. + \$
	6e. Total. Add lines 6a through 6d.	6e. \$
		Total claim
Total claims	6f. Student loans	6f. \$
from Part 2	6g. Obligations arising out of a separation agreement or divorce that you did not report as priority claims	6g. \$
	6h. Debts to pension or profit-sharing plans, and othe similar debts	6h. \$
	 Other. Add all other nonpriority unsecured claims. Write that amount here. 	6i. + \$
	6j. Total. Add lines 6f through 6i.	6j. \$

Official Form 106E/F

Case 19-42048 Doc 1 Filed 07/08/19 Entered 07/08/19 15:15:07 Desc Main Document Page 67 of 118

sched	uie E/F: (Creditors W	no Have Unse	cured Claims	12/15
	Form 106E				40/45
Case number (If known)	r				amended filing
United States	s Bankruptcy Court for	the: Distric	t of		☐ Check if this is a
Debtor 2 (Spouse, if filling	g) First Name	Middle Name	Last Name		
Debtor 1	Brandon First Name	Allan Middle Name	Blasidell Last Name		
Fill in this i	nformation to ider		Dissidell		

Be as complete and accurate as possible. Use Part 1 for creditors with PRIORITY claims and Part 2 for creditors with NONPRIORITY claims. List the other party to any executory contracts or unexpired leases that could result in a claim. Also list executory contracts on Schedule A/B: Property (Official Form 106A/B) and on Schedule G: Executory Contracts and Unexpired Leases (Official Form 106G). Do not include any creditors with partially secured claims that are listed in Schedule D: Creditors Who Have Claims Secured by Property. If more space is needed, copy the Part you need, fill it out, number the entries in the boxes on the left. Attach the Continuation Page to this page. On the top of any additional pages, write your name and case number (if known).

Part 1: List All of Your PRIORITY Unsecured Claims

1. D	o any creditors have priority unsecured claims	against you?			
	No. Go to Part 2.				
	Yes.				
2. L e n	ist all of your priority unsecured claims. If a created claim is identify what type of claim it is. If a	editor has more than one priority unsecured claim, list the claim has both priority and nonpriority amounts, list the laims in alphabetical order according to the creditor's napart 1. If more than one creditor holds a particular claim structions for this form in the instruction booklet.)	ame If you hav	e more than t	vo priority
(1	For an explanation of each type of daint, see the in		Total claim	Priority amount	Nonpriority amount
2.1		Last 4 digits of account number	\$	_ \$	\$
	Priority Creditor's Name	When was the debt incurred?			
	Number Street				
		As of the date you file, the claim is: Check all that apply	y .		
		☐ Contingent			
	City State 7IP Code	☐ Unliquidated			
	Who incurred the debt? Check one. Debtor 1 only	☐ Disputed			
	Debtor 2 only	Type of PRIORITY unsecured claim:			
	Debtor 1 and Debtor 2 only	□ Domestic support obligations			
	At least one of the debtors and another	Taxes and certain other debts you owe the government			
	☐ Check if this claim is for a community debt	 Claims for death or personal injury while you were intoxicated 			
Ž	Is the claim subject to offset?	Other. Specify			
	□ No				
	Yes		**************************************	•	
2.2		Last 4 digits of account number	\$	\$	p
:	Priority Creditor's Name	When was the debt incurred?			
	Number Street	As of the date you file, the claim is: Check all that app	ly.		
		☐ Contingent			
	City State ZIP Code	☐ Unliquidated			
	Who incurred the debt? Check one.	☐ Disputed			
1	Debtor 1 only	Type of PRIORITY unsecured claim:			
}	Debtor 2 only	☐ Domestic support obligations			
	Debtor 1 and Debtor 2 only	Taxes and certain other debts you owe the government	nt		
	 At least one of the debtors and another Check if this claim is for a community debt 	 Claims for death or personal injury while you were intoxicated 			
	is the claim subject to offset? ☐ No	Other. Specify			
1	Yes				

Case 19-42048 Doc 1 Filed 07/08/19 Entered 07/08/19 15:15:07 Desc Main

Document

Last Name

Page 68 of 118

Debtor 1

Brandon First Name

Allan

Middle Name

Blasidell

listing any entries on this page, number them	beginning with 2.3, followed by 2.4, and so forth.	Total claim	Priority amount	Nonprior amount
	Last 4 digits of account number	\$	\$	_ \$
Priority Creditor's Name	When was the debt incurred?			
Number Street				
	As of the date you file, the claim is: Check all that apply.			
	☐ Contingent			
City State ZIP Code	☐ Unliquidated			
	☐ Disputed			
Who incurred the debt? Check one.	Type of PRIORITY unsecured claim:			
Debtor 1 only	•			
Debtor 2 only Debtor 1 and Debtor 2 only	Domestic support obligations			
At least one of the debtors and another	Taxes and certain other debts you owe the government Claims for death or personal injury while you were			
	Claims for death or personal injury while you were intoxicated			
☐ Check if this claim is for a community debt	Other. Specify			
Is the claim subject to offset?				
No				
☐ Yes				
			e company e estate e estate en	na angleg geograpia amanga animatang manglebon
	Last 4 digits of account number	\$	_ \$	<u> </u>
Priority Creditor's Name	MIL and the delication of the state of the s			
Number Street	When was the debt incurred?			
	As of the date you file, the claim is: Check all that apply.			
City State ZIP Code	☐ Contingent ☐ Unliquidated			
City State ZIP Code	Disputed			
Who incurred the debt? Check one.				
Debtor 1 only	Type of PRIORITY unsecured claim:			
☐ Debtor 2 only	☐ Domestic support obligations			
Debtor 1 and Debtor 2 only	☐ Taxes and certain other debts you owe the government			
At least one of the debtors and another	☐ Claims for death or personal injury while you were			
☐ Check if this claim is for a community debt	intoxicated			
	Other. Specify			
Is the claim subject to offset?				
□ No				
			pa vanania () codahasini (() () () ()	
	Last 4 digits of account number	\$	\$	\$
Priority Creditor's Name				
	When was the debt incurred?			
Number Street	A f the date was till the date in Oheal all that and	r		
	As of the date you file, the claim is: Check all that apply	•		
	Contingent			
City State ZIP Code	Unliquidated			
Miles incurred the daht? Cheek are	☐ Disputed			
Who incurred the debt? Check one.	Type of PRIORITY unsecured claim:			
Debtor 1 only				
☐ Debtor 2 only ☐ Debtor 1 and Debtor 2 only	Domestic support obligations			
At least one of the debtors and another	Taxes and certain other debts you owe the government			
	 Claims for death or personal injury while you were intoxicated 		Antonomic or statement and an expension completions	and the state of t
☐ Check if this claim is for a community debt	Other. Specify			
Is the claim subject to offset?				
Is the claim subject to offset? □ No				
i I No				

Document

Case 19-42048 Doc 1 Filed 07/08/19 Entered 07/08/19 15:15:07 Desc Main Page 69 of 118

Brandon

Allan

Biasidell

Deptor	First Name	Middle Name	Last Name		
Dout 2	List All of Y	Vour NONPRI	ORITY Unsecured Claim	S	

	o any creditors have nonpriority unsec No. You have nothing to report in this party	ured cla art. Sub	aims against y mit this form to	the court with your other schedules.	
4. Li no	st all of your nonpriority unsecured cla onpriority unsecured claim, list the creditor cluded in Part 1. If more than one creditor	r separa · holds a	the alphabetic Itely for each cl I particular clai	al order of the creditor who holds each claim. If a creditor has raim. For each claim listed, identify what type of claim it is. Do not lim, list the other creditors in Part 3.If you have more than three non	more than one st claims already priority unsecured
Gl	aims fill out the Continuation Page of Part	. 4.			Total claim
	Coastal Credit Corporation			Last 4 digits of account number	8,315.00
	Nonpriority Creditor's Name 10333 N. Meridian St. Ste.400			When was the debt incurred? 09/16/2011	
	Number Street Indianapolis If City Ste		46290 ZIP Code	As of the date you file, the claim is: Check all that apply.	
	Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community is the claim subject to offset?	y debt		 ☐ Contingent ☑ Unliquidated ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ Student loans ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims ☐ Debts to pension or profit-sharing plans, and other similar debts 	
	☑ No □ Yes		enggippensierg verstess en verst en	Other. Specify Collection	¢ 7,880.0
1.2	U.S. Dept. of Education Nonpriority Creditor's Name Post Office Box 5609			When was the debt incurred? 10/26/2006	\$ <i>1</i> ,880.0
	01001171110	TX tate	75403 ZIP Code	As of the date you file, the claim is: Check all that apply.	
	Who incurred the debt? Check one. Debtor 1 only Debtor 2 only	tote		 ☐ Contingent ☐ Unliquidated ☐ Disputed Type of NONPRIORITY unsecured claim:	
	□ Debtor 1 and Debtor 2 only □ At least one of the debtors and another □ Check if this claim is for a communi	ty debt		 Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts 	3
	Is the claim subject to offset? ☑ No ☑ Yes		o politica de la compansión de la compan	Other. Specify	
4.3	U.S. Dept. of Education Nonpriority Creditor's Name Post Office Box 5609			Last 4 digits of account number	\$5,521.
	Number Street Greenville City	TX State	75403 ZIP Code	As of the date you file, the claim is: Check all that apply.	
	Who incurred the debt? Check one. Debtor 1 only Debtor 2 only			☐ Contingent☐ Unliquidated☐ Disputed☐	
	Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another			Type of NONPRIORITY unsecured claim:	
	☐ At least one of the debtors and another ☐ Check if this claim is for a commun	ity debt		Student loans Obligations arising out of a separation agreement or divorce	
	Is the claim subject to offset? 1 No 1 Yes			that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar deb Other. Specify	ts

Middle Name

Document

Case 19-42048 Doc 1 Filed 07/08/19 Entered 07/08/19 15:15:07 Desc Main Page 70 of 118

Debtor 1

Brandon First Name

Allan

Blasidell

r listing any entries on this p	age, number them beginning with	4.4, followed by 4.5, and so forth.	Tot	al claim
American Account Adv	visor, Inc	Last 4 digits of account number	\$	128.0
Nonpriority Creditor's Name	,	When was the debt incurred? 10/05/2017		
7460 80th St.				
Number Street Cottage Grove	MN 55016	As of the date you file, the claim is: Check all that apply.		
City	State ZIP Code	Contingent		
		Unliquidated		
Who incurred the debt? Check	cone.	☐ Disputed		
☐ Debtor 1 only ☐ Debtor 2 only		Type of NONPRIORITY unsecured claim:		
Debtor 1 and Debtor 2 only		☐ Student loans		
At least one of the debtors and	d another	Obligations arising out of a separation agreement or divorce that		
Check if this claim is for a	community debt	you did not report as priority claims		
		Debts to pension or profit-sharing plans, and other similar debts Other. Specify		
Is the claim subject to offset? 1 No		Other. Specify		
WINO □ Yes				
				o najmoni, mangga na 1944, a na
Metropolitan Anesthes	ia Network	Last 4 digits of account number	\$	45.
Nonpriority Creditor's Name	ia Notwork	When was the debt incurred? 12/01/2018		
Post Office Box 4715	59	when was the debt incurred?		
Number Street	MN 55447	As of the date you file, the claim is: Check all that apply.		
Plymouth City	State ZIP Code	Contingent		
City		☑ Unliquidated		
Who incurred the debt? Chec	k one.	☐ Disputed		
Debtor 1 only		Type of NONPRIORITY unsecured claim:		
☐ Debtor 2 only ☐ Debtor 1 and Debtor 2 only		Student loans		
At least one of the debtors ar	nd another	 Obligations arising out of a separation agreement or divorce that 		
☐ Check if this claim is for	community debt	you did not report as priority claims		
	-	□ Debts to pension or profit-sharing plans, and other similar debts □ Other. Specify Medical		
Is the claim subject to offset	7	Other. Specify Medical		
☑ No ☐ Yes				
ing angang ting milijang angang mangang ng pagang matawati panag na majang panggang angang angan angan angan a	per James en a contrata que a person en contrata do compresa, antenen en esta en esta en esta en esta en esta e	Last 4 digits of account number	\$	29
Consulting Radiologis Nonpriority Creditor's Name	st			
•	uite 400	When was the debt incurred? 12/01/2018		
Number Street		As of the date you file, the claim is: Check all that apply.		
Edina	MN 55439 State ZIP Code	□ Contingent		
City	State ZIP Code	☐ Contingent ☐ Unliquidated		
Who incurred the debt? Che	ck one.	Disputed		
Debtor 1 only		The state of the s		
Debtor 2 only		Type of NONPRIORITY unsecured claim:		
☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors a	nd another	Student loans		
		 Obligations arising out of a separation agreement or divorce that you did not report as priority claims 		
☐ Check If this claim is for	a community debt	Debts to pension or profit-sharing plans, and other similar debts		
Is the claim subject to offse	17	☑ Other. Specify Medical		
™ No				
☐ Yes				

Case 19-42048 Doc 1 Filed 07/08/19 Entered 07/08/19 15:15:07 Desc Main Page 71 of 118 Document

Debtor 1

Brandon

Allan

Blasidell

Case number (if known)_

Part 3:				
		-		
	•		4.	

List Others to Be Notified About a Debt That You Already Listed

				on which entry in Part 1 or Part 2 did you list the original creditor?
Name				Line of (Check one): Part 1: Creditors with Priority Unsecured Claims
lumber	Street			Part 2: Creditors with Nonpriority Unsecured Claims
Idilibei	Guodi			
				Last 4 digits of account number
ity		State	ZIP Code	
lame				On which entry in Part 1 or Part 2 did you list the original creditor?
,,,				Line of (Check one): Part 1: Creditors with Priority Unsecured Claims
lumber	Street			☐ Part 2: Creditors with Nonpriority Unsecured Claims
City		State	ZIP Code	Last 4 digits of account number
The whole services and the		ear that the statements which all productives of per		On which entry in Part 1 or Part 2 did you list the original creditor?
ame				Line of (Check one): Part 1: Creditors with Priority Unsecured Claims
	Oterat			Line of (Check one): Part 1: Creditors with Phoney disecuted chains Part 2: Creditors with Nonpriority Unsecured
Number	Street			Claims
				Last 4 digits of account number
City		State	ZIP Code	en de la companya de
Name				On which entry in Part 1 or Part 2 did you list the original creditor?
ame				Line of (Check one): Part 1: Creditors with Priority Unsecured Claims
Number	Street	Maria		Part 2: Creditors with Nonpriority Unsecured
				Claims
City		State	ZIP Code	Last 4 digits of account number
aity				On which entry in Part 1 or Part 2 did you list the original creditor?
Name				
	w 9800			Line of (Check one): Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured
Number	Street			Claims
				Last 4 digits of account number
City	and the second was to second as a contract of the second and the s	State	ZIP Code	-
				On which entry in Part 1 or Part 2 did you list the original creditor?
Name				Line of (Check one): Part 1: Creditors with Priority Unsecured Claims
Number	Street			Part 2: Creditors with Nonpriority Unsecured
				Claims
		State	ZIP Code	Last 4 digits of account number
City	to all whose were a memorial weep of \$1.5 at \$1500 to \$1000 to week to make the	JUNE		On which entry in Part 1 or Part 2 did you list the original creditor?
Name				
				Line of (Check one): Part 1: Creditors with Priority Unsecured Claims
Number	Street			Part 2: Creditors with Nonpriority Unsecured Claims
,				
City		State	ZIP Code	Last 4 digits of account number

Case 19-42048 Doc 1 Entered 07/08/19 15:15:07 Desc Main Filed 07/08/19 Document

Allan

Blasidell

Page 72 of 118

Debtor 1

Brandon First Name

Last Name

Case number (if known)_

Part	4:

Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. § 159. Add the amounts for each type of unsecured claim.

			Total claim
Fotal claims	6a. Domestic support obligations	6а.	\$
rom Part 1	6b. Taxes and certain other debts you owe the government		\$
	 Claims for death or personal injury while you were intoxicated 	6c.	\$
	6d. Other. Add all other priority unsecured claims. Write that amount here.	6d.	+\$
	6e. Total. Add lines 6a through 6d.	6e.	\$
			Total claim
Total claims	6f. Student loans	6f.	\$
from Part 2			Ψ
	6g. Obligations arising out of a separation agreement or divorce that you did not report as priority claims	6g.	\$
	or divorce that you did not report as priority	6g. 6h.	
	or divorce that you did not report as priority claims 6h. Debts to pension or profit-sharing plans, and other		\$

Case 19-42048 Doc 1 Filed 07/08/19 Entered 07/08/19 15:15:07 Desc Main Document Page 73 of 118

Debtor 1	Brandon	Allen	Braisdell
Jepioi i	First Name	Middle Name	Last Name
Debtor 2	Tonya	Draughon	Braisdell
Spouse, if filing)		Middle Name	Last Name
Inited States	Bankruptcy Court for	the: District of Minnesota	

Official Form 106E/F

Part 1: List All of Your PRIORITY Unsecured Claims

Schedule E/r: Creditors who have Unsecured Claims

12/15

Check if this is an amended filing

Be as complete and accurate as possible. Use Part 1 for creditors with PRIORITY claims and Part 2 for creditors with NONPRIORITY claims. List the other party to any executory contracts or unexpired leases that could result in a claim. Also list executory contracts on Schedule A/B: Property (Official Form 106A/B) and on Schedule G: Executory Contracts and Unexpired Leases (Official Form 106G). Do not include any creditors with partially secured claims that are listed in Schedule D: Creditors Who Have Claims Secured by Property. If more space is needed, copy the Part you need, fill it out, number the entries in the boxes on the left. Attach the Continuation Page to this page. On the top of any additional pages, write your name and case number (if known).

	Do any creditors have priority unsecured claims	against you?	
1.	No. Go to Part 2.	agamet year	
2.	each claim listed, identify what type of claim it is. If a	editor has more than one priority unsecured claim, list to a claim has both priority and nonpriority amounts, list the laims in alphabetical order according to the creditor's reart 1. If more than one creditor holds a particular claimstructions for this form in the instruction booklet.)	name. If you have more than two priority n, list the other creditors in Part 3.
	_		Total claim Priority Nonpriority amount amount
2.1	Minnesota Unemployment Insurance	Last 4 digits of account number	\$ 7,252.00 \$ 7,252.00 \$ 0.00
1	Priority Creditor's Name Post Office Box 64653	When was the debt incurred? $02/04/2017$	
1	Number Street	As of the date you file, the claim is: Check all that app	lv :
	St. Paul MN 55164		.
1	City State 7IP Code	Contingent	
	Who incurred the debt? Check one.	☑ Unliquidated	
1	Dobtor 1 only	☐ Disputed	
1	Debtor 2 only	Type of PRIORITY unsecured claim:	
	Debtor 1 and Debtor 2 only	Domestic support obligations	
	At least one of the debtors and another	Taxes and certain other debts you owe the governmen	t
	☐ Check if this claim is for a community debt	Claims for death or personal injury while you were intoxicated	
1	Is the claim subject to offset?	Other. Specify over payment	
	No	Outer, opening	
	Yes - the control of	જન્મ જુવાર અને મહિલાનું અને ત્રાંતિ તેનનું અમે ત્રાંતિ કર્યું હતા. અનું તાલ અને તાલ કું અને કર્યું કર્યું કર્યા છે. કે કાર્યું કર્યા અને કર્યું કર્યા હતા. તાલું કર્યું કર્યા હતા. તાલું કર્યા કર્યા હતા. તાલું કર્યા કર્યા હતા. તાલું કર્યા કર્યા હતા. તાલું કર્યા કર્યા કર્યા કર્યા કર્યા હતા. તાલું કર્યા કર્યા કર્યા કર્યા કર્યા હતા. તાલું કર્યા કરા કર્યા કર્યા કરા કર્યા કરા કર્યા કર્યા કર્યા કર્ય	6 248 00 . 6 248 00 . 0.00
2.2	Texas Atty. Gen. Child Support Div		\$_6,248.00
	Priority Creditor's Name 300 West 15th St	When was the debt incurred? 06/20/2010	
į	Number Street		t.,
	Halling	As of the date you file, the claim is: Check all that app	oly.
	Ausitn TX 78701	Contingent	
	City State ZIP Code	☑ Unliquidated	
	Who incurred the debt? Check one.	☐ Disputed	
	Debtor 1 only	Type of PRIORITY unsecured claim:	
1	Debtor 2 only	Domestic support obligations	
ì	Debtor 1 and Debtor 2 only	Taxes and certain other debts you owe the government	nt
1	At least one of the debtors and another	Claims for death or personal injury while you were	
-	Check if this claim is for a community debt	intoxicated	
	Is the claim subject to offset? ☑ No	Other. Specify	
	☐ Yes		

Case 19-42048 Doc 1 Filed 07/08/19 Entered 07/08/19 15:15:07 Desc Main

Document

Last Name

Page 74 of 118

Debtor 1

Brandon

Allen

Middle Name

Braisdell

Case number (if known)_

As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Disputed Who incurred the debt? Check one. Pebtor 1 only Debtor 2 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Claims for death or personal injury while you were intoxicated Check if this claim is for a community debt Is the claim subject to offset?	r listing any entries on this page, number them	beginning with 2.3, followed by 2.4, and so forth.	Total claim	Priority amount	Nonpriority amount
When was the debt incurred? As of the date you file, the claim is: Check all that apply. Contingent Chiquidated Check all that apply. Contingent Chiquidated Check all that apply. Check all that debts and another Check if this claim is for a community debt Check if the claim is for a community debt Check if this claim is for a community debt Check if this claim is continued Check if this claim is state Check if this claim is for a community debt Check if this claim is for a community debt Contingent Check if this claim is for a community debt Contingent Check if this claim is for a community debt Contingent Check if this claim is for a community debt Contingent Contingent Contingent Check if this claim is for a community debt Check if this claim is for a community de	Di. di. O. di. d. Nasa	Last 4 digits of account number	\$	\$	\$
As of the date you file, the claim is: Check all that apply. Contingent Contin	Priority Creditor's Name	When was the debt incurred?			
Confingent Uniquested Confingent Uniquested Confingent Uniquested Confingent Uniquested Confingent Confingent Confingent Confingent Confingent Confingent Confine Co	Number Street	As of the date you file, the claim is: Check all that apply.			
Who incurred the debt? Check one. Debtor 1 only Check if this claim is for a community debt Size 2 Debtor 2 only Size 2 Debtor 2 only Size 3 Debtor 3 Debtor 3 Debtor 3 Debtor 3 Debtor 3 Debtor 4 Debtor 3 Debtor 4 Debtor 5 Debtor 4 Debtor 4 Debtor 5 Debtor 4 Debtor 6 Debtor 6 Debtor 6 Debtor 6 Debtor 6 Debtor 7 Debtor 7 Debtor 7 Debtor 7 Debtor 7 Debtor 7 Debtor 8 Debtor 9 Debtor 8 Debtor 9 Debtor 8 Debtor 9 Debt					
Who incurred the debt? Check one. Debtor 2 only Debtor 3 only Debtor 4	City State ZIP Code	☐ Unliquidated			
Debtor 1 only Debtor 2 only Debtor 2 only Debtor 2 only Debtor 1 and Debtor 2 only Debtor 1 only Debtor 2 only Debtor 2 only Debtor 1 only Debtor 1 only Debtor 1 only Debtor 1 only Debtor 2	Milho incurred the debt? Check one	☐ Disputed			
Debtor 2 only Damestic support obligations Taxes and certain other debts you owe the government Claims for death or personal injury while you were intoxicated Other. Specify Damestic support obligations Taxes and certain other debts you owe the government Claims for death or personal injury while you were intoxicated Other. Specify Debtor 1 only Debtor 1 only Debtor 2 only Debtor 2 only Debtor 1 and Debtor 2 only Debtor 1 only Debtor 2 only Debtor 1 only Debtor 2 only Debtor 2 only Debtor 2 only Debtor 1 only Debtor 2 only Debtor 2 only Debtor 3 only Debtor 3 only Debtor 3 only Debtor 4 only Debtor 4 only Debtor 5 only Debtor 6 only		Type of PRIORITY unsecured claim:			
Debtor 1 and Debtor 2 only Tabes and certain other debts you owe the government Claims for death or personal injury while you were intoxicated Check if this claim is for a community debt Check if this claim subject to offset? When was the debt incurred? When was the debt? Check one. Debtor 1 and Debtor 2 only Debtor 1 and Debtor 2 only Check if this claim is for a community debt Check if this claim is for a community debt Check offset? Name Check if this claim is for a community debt Check offset? Name Check if this claim is for a community debt Check offset? Name Check if this claim is for a community debt Check offset? Name Check if this claim is for a community debt Check offset? Name Check if this claim is for a community debt Check offset or personal injury while you were intoxicated Check offset or personal injury while you were Seest Check one. Check if this claim is for a community debt Check offset or personal injury while you were Seest Check offset or personal injury while you were Seest Check offset or personal injury while you were Check or check or check of the debtor 2 only Check or ch		•			
At least one of the debtors and another Claims for death or personal injury while you were intoxicated Claims of death or personal injury while you were intoxicated Claims for death or personal injury while you were intoxicated Claims for death or personal injury while you were intoxicated Claims for death or personal injury while you were intoxicated Claims for death or personal injury while you were intoxicated Claims for death or personal injury while you were intoxicated Claims for death or personal injury while you were intoxicated Claims for death or personal injury while you were intoxicated Claims for death or personal injury while you were intoxicated Claims for death or personal injury while you were intoxicated Claims for death or personal injury while you were intoxicated Claims for death or personal injury while you were intoxicated Claims for death or personal injury while you were intoxicated Claims for death or personal injury while you were intoxicated Claims for death or personal injury while you were intoxicated Claims for death or personal injury while you were intoxicated Claims for death or personal injury while you were intoxicated Claims for death or personal injury while you were intoxicated Claims for death or personal injury while you were intoxicated Claims for death or personal injury while you were intoxicated Claims for death or personal injury while you were intoxicated Claims for death or personal injury while you were intoxicated Claims for death or personal injury while you were intoxicated Claims for death or personal injury while you were intoxicated Claims for death or personal injury while you were intoxicated Claims for death or personal injury while you were intoxicated Claims for death or personal injury while you were intoxicated Claims for death or personal injury while you were intoxicated Claims for death or personal injury while you were intoxicated Claims for death or personal injury while you were in					
Check if this claim is for a community debt Check if this claim subject to offset? No Yes No Yes No Yes No No Yes No No No No No No No N					
Check if this claim is for a community debt Other. Specify					
No	☐ Check if this claim is for a community debt				
Yes	Is the claim subject to offset?				
Priority Creditor's Name When was the debt incurred? As of the date you file, the claim is: Check all that apply. Contingent Unitquidated Disputed	□ No				
Cast 4 digits of account number Street As of the date you file, the claim is: Check all that apply.			the about the result of the Control	endend different discussions successive and engage	- Velifice and the Section of Section 1982 alone A
When was the debt incurred? As of the date you file, the claim is: Check ell that apply. Contingent Unliquidated Disputed Disputed Disputed Disputed Disputed Debtor 1 only Debtor 2 only Domostic support obligations Taxes and certain other debts you were inclosedated Other. Specify Debtor 1 and Debtor 2 only Demostic support obligations Check if this claim is for a community debt Other. Specify Other. Specif		Last 4 digits of account number	\$	\$	<u> </u>
As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Disputed	Priority Creditor's Name				
As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Disputed		When was the debt incurred?			
City State ZIP Code Unliquidated Disputed Who incurred the debt? Check one. Debtor 1 only Type of PRIORITY unsecured claim: Debtor 2 only Domostic support obligations At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset? No Yes Last 4 digits of account number \$ \$ \$ \$ Priority Creditor's Name When was the debt Incurred? As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Disputed Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Domestic support obligations Type of PRIORITY unsecured claim: Unliquidated Disputed Type of PRIORITY unsecured claim: Debtor 2 only Debtor 2 only Domestic support obligations Type of PRIORITY unsecured claim: Type of PRIORITY unsecured claim: Domestic support obligations Type of PRIORITY unsecured claim: Domestic support obligations Type of PRIORITY unsecured claim: Domestic support obligations Taxes and certain other debts you were intoxicated the debt or personal injury while you were intoxicated the debt or personal injury while you were intoxicated the debt or personal injury while you were intoxicated the debt or personal injury while you were intoxicated the debt or personal injury while you were intoxicated the debt or personal injury while you were intoxicated the debt or personal injury while you were intoxicated the debt or personal injury while you were intoxicated the debt or personal injury while you were intoxicated the debt or personal injury while you were intoxicated the debt or personal injury while you were intoxicated the debt or personal injury while you were intoxicated the debt or personal injury while you were intoxicated the debt or personal injury while you were intoxicated the debt or personal injury while you were intoxicated the debt or personal injury while you were intoxicated the debt or personal injury while you were intoxicated the debt or personal injury while you were intoxicated the debt or personal injury while you were intoxicated t	Number Street	A - which date you file the claim is: Check all that apply			
Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset? No Yes Last 4 digits of account number Street As of the date you file, the claim is: Check sil that apply. Contingent Unliquidated Disputed Unliquidated Disputed Unliquidated Debtor 1 only Debtor 2 only Type of PRIORITY unsecured claim: Debtor 1 and Debtor 2 only Debtor 1 and Debtor 2 only Debtor 1 and Debtor 2 only Type of PRIORITY unsecured claim: Debtor 1 and Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Claims for death or personal injury while you were intoxicated Other. Specify Domestic support obligations Taxes and certain other debts you owe the government Claims for death or personal injury while you were intoxicated Disputed					
Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only Debtor 1 and Debtor 3 only Debtor 4 and Debtor 3 only Debtor 4 and Debtor 3 only Debtor 4 and Debtor 4 only Debtor 4 and Debtor 5 only Debtor 6 only Debtor 8 only Debtor 8 only Debtor 8 only Debtor 9 only Debt					
Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset? No Yes Last 4 digits of account number Street As of the date you file, the claim is: Check all that apply. City State ZIP Code Unliquidated Disputed Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 2 only Debtor 2 only Claims for death or personal injury while you were intoxicated Disputed Type of PRIORITY unsecured claim: Type of PRIORITY unsecured claim: Claims for death or personal injury while you were intoxicated Other. Specify State ZIP Code Contingent Unliquidated Disputed Type of PRIORITY unsecured claim: Claims for death or personal injury while you were intoxicated	City State ZIP Code	· · · · · · · · · · · · · · · · · · ·			
Debtor 1 only	Who incurred the daht? Check one	☐ Disputed			
□ Debtor 2 only □ Debtor 1 and Debtor 2 only □ At least one of the debtors and another □ Check if this claim is for a community debt □ Check if this claim is for a community debt □ Street □ No □ Yes □ Yes □ No □ Yes □ Street □ Contingent □ Contingent □ Unliquidated □ Disputed □ Debtor 1 only □ Debtor 2 only □ Debtor 2 only □ Debtor 2 only □ At least one of the debtors and another □ Claims for death or personal injury while you were intoxicated □ Other. Specify □ Other. Specify □ Other. Specify □ When was the debt incurred? □ Contingent □ Unliquidated □ Disputed □ Debtor 1 only □ Debtor 2 only □ Debtor 1 and Debtor 2 only □ At least one of the debtors and another □ Claims for death or personal injury while you were intoxicated □ Injury while you were intoxicated □ Debtor 1 only □ Demestic support obligations □ Taxes and certain other debts you owe the government □ Claims for death or personal injury while you were intoxicated □ Desired = Desi		Type of PRIORITY unsecured claim:			
□ Debtor 1 and Debtor 2 only □ At least one of the debtors and another □ Check if this claim is for a community debt □ Check if this claim is for a community debt □ Check if this claim is for a community debt □ Check if this claim is for a community debt □ Check if this claim is for a community debt □ Claims for death or personal injury while you were intoxicated □ Other. Specify □ No □ Yes □ No □ Yes □ Last 4 digits of account number □ \$ \$ \$ \$ ■ □ Priority Creditor's Name □ When was the debt incurred? □ Contingent □ Uniquidated □ Disputed □ Disputed □ Debtor 1 only □ Debtor 1 only □ Debtor 1 and Debtor 2 only □ Debtor 1 and Debtor 2 only □ At least one of the debtors and another □ Claims for death or personal injury while you were intoxicated □ Disputed who incurred: □ Debtor 1 and Debtor 2 only □ Claims for death or personal injury while you were intoxicated □ Disputed □ Disp		D - " ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' '			
At least one of the debtors and another Claims for death or personal injury while you were intoxicated Other. Specify Is the claim subject to offset? No Yes Last 4 digits of account number \$ \$ \$ \$ Priority Creditor's Name When was the debt incurred? As of the date you file, the claim is: Check all that apply. City State ZIP Code Disputed Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 2 only At least one of the debtors and another Taxes and certain other death or personal injury while you were intoxicated Other. Specify When was the debt incurred? Last 4 digits of account number \$ \$ \$ \$ Very State ZIP Code Debtor 2 only Debtor 1 and Debtor 2 only Taxes and certain other debts you owe the government Claims for death or personal injury while you were intoxicated					
Check if this claim is for a community debt Check if this claim is for a community debt Check offset? No					
Check if this claim is for a community debt Other. Specify					
□ No □ Yes Last 4 digits of account number	☐ Check if this claim is for a community debt				
Yes Last 4 digits of account number \$ \$ \$ \$ \$	Is the claim subject to offset?				
Priority Creditor's Name When was the debt Incurred? Number Street As of the date you file, the claim is: Check all that apply. City State ZIP Code Unliquidated Disputed Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 2 and Debtor 2 only At least one of the debtors and another Claims for death or personal injury while you were intoxicated					
Priority Creditor's Name When was the debt Incurred? As of the date you file, the claim is: Check all that apply. City State ZIP Code Unliquidated Disputed Who incurred the debt? Check one. Type of PRIORITY unsecured claim: Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only Taxes and certain other debts you owe the government At least one of the debtors and another Last 4 digits or account number When was the debt Incurred? As of the date you file, the claim is: Check all that apply. Unliquidated Disputed Type of PRIORITY unsecured claim: Claims for death or personal injury while you were intoxicated					
When was the debt incurred? As of the date you file, the claim is: Check all that apply. City State ZIP Code Unliquidated Disputed Who incurred the debt? Check one. Debtor 1 only Type of PRIORITY unsecured claim: Debtor 2 only Domestic support obligations Debtor 1 and Debtor 2 only Taxes and certain other debts you owe the government At least one of the debtors and another Claims for death or personal injury while you were intoxicated		Last 4 digits of account number	\$	\$	\$
Number Street As of the date you file, the claim is: Check all that apply. City State ZIP Code Unliquidated Disputed Who incurred the debt? Check one. Type of PRIORITY unsecured claim: Debtor 1 only Domestic support obligations Debtor 2 only Domestic support obligations Debtor 1 and Debtor 2 only Taxes and certain other debts you owe the government At least one of the debtors and another Claims for death or personal injury while you were intoxicated	Prionty Creditor's Name	When was the debt incurred?			
Contingent Unliquidated Disputed Who incurred the debt? Check one. Type of PRIORITY unsecured claim: Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Claims for death or personal injury while you were intoxicated	Number Street				
City State ZIP Code Unliquidated			·.		
Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Disputed Type of PRIORITY unsecured claim: Domestic support obligations Taxes and certain other debts you owe the government Claims for death or personal injury while you were intoxicated					
Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 2 and Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Type of PRIORITY unsecured claim: Domestic support obligations Taxes and certain other debts you owe the government Claims for death or personal injury while you were intoxicated	City State ZIP Code	•			
□ Debtor 2 only □ Debtor 1 and Debtor 2 only □ At least one of the debtors and another □ Claims for death or personal injury while you were intoxicated	Who incurred the debt? Check one.	·			
□ Debtor 2 only □ Debtor 1 and Debtor 2 only □ At least one of the debtors and another □ Claims for death or personal injury while you were intoxicated	Debtor 1 only	Type of PRIORITY unsecured claim:			
□ Debtor 1 and Debtor 2 only □ At least one of the debtors and another □ Claims for death or personal injury while you were intoxicated	-				
At least one of the debtors and another Claims for death or personal injury while you were intoxicated					
Claims for death of personal injury write you were intoxicated					
			sproproporation Service New Arthres (1985)	geggge-e-leg-de-milesetts-de-detbakent	eries de la recompanya de la companya de la company
	☐ Check if this claim is for a community debt				
	Is the claim subject to offset?				
	□ No				

Case 19-42048 Doc 1 Filed 07/08/19 Entered 07/08/19 15:15:07 Desc Main Document Page 75 of 118

Δilon

ebtor 1	First Name Middle Name	Last Name	Dialogo	Case number (# known)		
Part 2	2: List All of Your NONPRIOR	ITY Unse	cured Claims			
	any creditors have nonpriority uns No. You have nothing to report in this Yes	ecured cla part. Subr	nims against you	e court with your other schedules.		
noi inc		itor separa itor holds a		order of the creditor who holds each claim. If a creditor has not not limit and it is. Do not lift the other creditors in Part 3.If you have more than three non		
					Total cl	aim
	AAFES/Military Star			Last 4 digits of account number 2 0 0 1	\$	3,774.00
3	Nonpriority Creditor's Name 3911 S. Walton Walker Blvc Number Street	i		When was the debt incurred? 11/21/2011		
[Dallas City	TX State	75236 ZIP Code	As of the date you file, the claim is: Check all that apply.		
١	Who incurred the debt? Check one. ☐ Debtor 1 only			☐ Contingent ☐ Unliquidated ☐ Disputed		
	☑ Debtor 2 only ☐ Debtor 1 and Debtor 2 only			Type of NONPRIORITY unsecured claim:		
(☐ At least one of the debtors and another☐ Check if this claim is for a commu	aity debt		Student loansObligations arising out of a separation agreement or divorce		
i	☐ Creck if this claim is for a common is the claim subject to offset? ☑ No ☐ Yes	nty desit		that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Other. Specify Credit		
.2	AAFES/Military Star Nonpriority Creditor's Name	commontes (\$200,200,200, tirk \$100,000) TOPOOT DE	gentambil skatinatio hamil kahali skatin samman toggrafi frat	Last 4 digits of account number $\frac{3 0 0 1}{11/20/2011}$	\$	2,401.00
•	3911 S. Walton Walker Blvd Number Street Dallas	TX	75236	As of the date you file, the claim is: Check all that apply.		
	Who incurred the debt? Check one.	State	ZIP Code	☐ Contingent☐ Unliquidated☐ Disputed		
	☐ Debtor 1 only ☐ Debtor 2 only ☐ Debtor 2 and Debtor 2 only ☐ At least one of the debtors and another ☐ Check if this claim is for a commuls the claim subject to offset? ☐ No ☐ Yes			Type of NONPRIORITY unsecured claim: ☐ Student loans ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims ☐ Debts to pension or profit-sharing plans, and other similar debts ☐ Other. Specify Credit	\$	
4.3	Acceptance Now Nonpriority Creditor's Name 5501 Headquarter Drive		SACKER - ASSESSMENT PROPERTY - NEWSYNDAW - AND STOCKER STOCKER STOCKER STOCKER STOCKER STOCKER STOCKER STOCKER	Last 4 digits of account number 5 6 9 1 When was the debt incurred? 11/30/2013	\$	5,759.00
	Number Street Plano City Who incurred the debt? Check one.	TX State	75024 ZIP Code	 As of the date you file, the claim is: Check all that apply. □ Contingent □ Unliquidated □ Disputed 		
	Debtor 2 only Debtor 1 and Debtor 2 only			Type of NONPRIORITY unsecured claim:		
	☐ At least one of the debtors and anothe☐ ☐ Check if this claim is for a comme			Student loans Obligations arising out of a separation agreement or divorce		

that you did not report as priority claims

☑ Other Specify Auto Loan

Debts to pension or profit-sharing plans, and other similar debts

☑ No

Yes

Is the claim subject to offset?

Middle Name

Document

Case 19-42048 Doc 1 Filed 07/08/19 Entered 07/08/19 15:15:07 Desc Main Page 76 of 118

Debtor 1

Brandon First Name

Allen

Braisdell

Case number (if known)_

listing any entries on this pag	e, number them	beginning with	4.4, followed by 4.5, and so forth.	Total cla
Acceptance Now			Last 4 digits of account number 9 0 5 4	_{\$} 4,124
Acceptance NOW Ionpriority Creditor's Name			18/han was the debt insurred? 08/31/2014	
5501 Headquarter Drive)		When was the debt incurred?	
lumber Street			As of the date you file, the claim is: Check all that apply.	
Plano	TX			
City	State	ZIP Code	☐ Contingent ☐ Unliquidated	
Who incurred the debt? Check or	1e.		Disputed	
Debtor 1 only			Car Disputed	
Debtor 2 only			Type of NONPRIORITY unsecured claim:	
Debtor 1 and Debtor 2 only			Student loans	
At least one of the debtors and a	nother		Obligations arising out of a separation agreement or divorce that	
Check if this claim is for a co	ımmunitv deht		you did not report as priority claims	
			Debts to pension or profit-sharing plans, and other similar debts Other. Specify Auto Loan	
s the claim subject to offset?			Other. Specify Auto Loan	
∑ No				
Yes				
kraffrenske reneraliserande demokrave rek eksterne konta strommer valde medlementerande tom en greg tij				sa go emit matematikan jangkan Malifester (1920)
D. U. Ott. Eta-maial Calm	·		Last 4 digits of account number 5 6 9 7	\$ 1,98°
Bull City Financial Solu Nonpriority Creditor's Name	uon		When was the debt incurred? 06/27/2013	
2609 N. Duke St. STE.	500		When was the debt incurred?	
Number Street	300		 As of the date you file, the claim is: Check all that apply. 	
Durham	NC	27704		
City	State	ZIP Code	Contingent	
Who incurred the debt? Check o	no.		Unliquidated	
••••	ne.		☐ Disputed	
☐ Debtor 1 only ☐ Debtor 2 only			Type of NONPRIORITY unsecured claim:	
Debtor 1 and Debtor 2 only			☐ Student loans	
At least one of the debtors and a	another		Obligations arising out of a separation agreement or divorce that	
			you did not report as priority claims	
Check if this claim is for a c	ommunity debt		Debts to pension or profit-sharing plans, and other similar debts	
Is the claim subject to offset?			Other, Specify_Collection	
☑ No				
☐ Yes				
		approprieta de la comercia del comercia de la comercia del comercia de la comercia del la comercia de la comercia del la comercia de la comer	LLANGE CONTROL OF A SERVICE OF	_{\$} 17,74
Coastal Credit LLC			Last 4 digits of account number 1 2 1 3	T.,
Nonpriority Creditor's Name				
10333 N. Meridian St.	Ste.400		When was the debt incurred? U9/10/2011	
Number Street		40000	As of the date you file, the claim is: Check all that apply.	
Indianapolis	IN State	46290 ZIP Code	Contingent	
City	ાતા ઉ	2.11 Jule	☑ Unliquidated	
Who incurred the debt? Check	one.		Disputed	
Debtor 1 only			·	
Debtor 2 only			Type of NONPRIORITY unsecured claim:	
Debtor 1 and Debtor 2 only			☐ Student loans	
At least one of the debtors and	another		Obligations arising out of a separation agreement or divorce that	
Check if this claim is for a	community debt		you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts	
Is the claim subject to offset?	•		Other. Specify Auto Loan	
is the ciaim Subject to OffSet (- Outon Opening / total	

Doc 1 Case 19-42048 Filed 07/08/19 Entered 07/08/19 15:15:07 Desc Main Page 77 of 118 Document

Debtor 1

Brandon

Allen

Last Name

Braisdell

Case number (if known)_

Part 3:

List Others to Be Notified About a Debt That You Already Listed

5. Use this page only if you have others to be notified about your bankruptcy, for a debt that you already listed in Parts 1 or 2. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the original creditor in Parts 1 or 2, then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Parts 1 or 2, list the additional creditors here. If you do not have additional parsons to be polified for any debts in Parts 1 or 2, do not fill out or submit this page. additional creditors here. If you do not have additional persons to be notified for any debts in Parts 1 or 2, do not fill out or submit this page.

Name	On which entry in Part 1 or Part 2 did you list the original creditor?
Number Street	Line of (Check one): Part 1: Creditors with Priority Unsecured Claims
Street Street	Part 2: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claim
	Last 4 digits of account (
City State ZIP Code	Last 4 digits of account number
Name	On which entry in Post 6 and 1 and 1
	On which entry in Part 1 or Part 2 did you list the original creditor?
Number Street	Line of (Check one): Part 1: Creditors with Priority Unsecured Claims
	Claims Part 2: Creditors with Nonpriority Unsecured
City State ZIP Code	Last 4 digits of account number
Name	On which entry in Part 1 or Part 2 did you list the original creditor?
Number Street	
Number Street	Line of (Check one): Part 1: Creditors with Priority Unsecured Claims
	Claims Part 2: Creditors with Nonpriority Unsecured
City State ZIP Code	Last 4 digits of account number
Name	On which entry in Part 1 or Part 2 did you list the original creditor?
Number Street	Line of (Check one): Part 1: Creditors with Priority Unsecured Claims
	Claims Part 2: Creditors with Nonpriority Unsecured
ity State ZIP Code	Last 4 digits of account number
ame	On which entry in Part 1 or Part 2 did you list the original creditor?
Imber Street	
	Line of (Check one): Part 1: Creditors with Priority Unsecured Claims Claims
	Claims — Fart 2. Creditors with Nonpriority Unsecured
y State ZIP Code	Last 4 digits of account number
me	On which entry in Part 1 or Part 2 did you list the original creditor?
nber Street	Line of (Check one): Part 1: Creditors with Priority Unsecured Claims
	Claims Part 2: Creditors with Nonpriority Unsecured Claims
State ZIP Code	Last 4 digits of account number
е	On which entry in Part 1 or Part 2 did you list the original creditor?
ber Street	Line of (Check one): Part 1: Creditors with Priority Unsecured Claims
	Li Pad 2: Cadiana and a
	Claims — Fart 2. Creditors with Nonpriority Unsecured

Case 19-42048 Doc 1 Filed 07/08/19 Entered

Document

Entered 07/08/19 15:15:07 Desc Main Page 78 of 118

Debtor 1

Brandon

Allen

Braisdell

Case number (if known)

Part 4:

Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. § 159. Add the amounts for each type of unsecured claim.

			Total claim	
Total claims	6a. Domestic support obligations	6a.	\$	6,248.00
irom Part 1	6b. Taxes and certain other debts you owe the government	6b.	\$	7,252.00
	6c. Claims for death or personal injury while you were intoxicated	6c.	\$	0.00
±	6d. Other. Add all other priority unsecured claims. Write that amount here.	6d.	+ \$	0.00
	6e. Total. Add lines 6a through 6d.	6e.	\$	13,500.00
			Total claim	
Total claims	6f. Student loans	6f.	\$	32,270.45
nom Part 2	6g. Obligations arising out of a separation agreement or divorce that you did not report as priority claims	6g.	\$	0.00
	Ch. Data 4		-	
	6h. Debts to pension or profit-sharing plans, and other similar debts	6h.	\$	0.00
	6i. Other. Add all other nonpriority unsecured claims. Write that amount here.		\$ + _{\$}	0.00

Case 19-42048 Doc 1 Filed 07/08/19 Entered 07/08/19 15:15:07 Desc Main Page 79 of 118 Document

Fill in this i	nformation to ide	ntify your case:		
Debtor Debtor 2 (Spouse If filing) United States		Allen Middle Name Draughon Middle Name r the: District of Minnesota	Blaisdell Last Name Blaisdell Last Name	
Case number (If known)	r			☐ Check if this i amended filin

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- Do you have any executory contracts or unexpired leases?
 - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
 - Yes. Fill in all of the information below even if the contracts or leases are listed on Schedule A/B: Property (Official Form 106A/B).
- 2. List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

State what the contract or lease is for Person or company with whom you have the contract or lease 2.1 Name Street Number ZIP Code State City 2.2 Name Street Number ZIP Code City State 2.3 Name Street Number ZIP Code State City 2.4 Name Street Number ZIP Code State City 2.5 Name Number Street

City

State

ZIP Code

Case 19-42048 Doc 1 Filed 07/08/19 Entered 07/08/19 15:15:07 Desc Main Document Page 80 of 118

Blaisdell Case number (# known) Allen Brandon Debtor 1 First Name Additional Page if You Have More Contracts or Leases What the contract or lease is for Person or company with whom you have the contract or lease 2.<u>2</u> Name Street Number ZIP Code State City Name Number Street ZIP Code City State 2.__ Name Number Street State ZIP Code City 2._ Name Number Street ZIP Code State City 2._ Name Street Number ZIP Code State City 2._ Name Street Number ZIP Code State City Name Street Number ZIP Code State City 2._ Name Street Number ZIP Code State City

Case 19-42048 Doc 1 Filed 07/08/19 Entered 07/08/19 15:15:07 Desc Main Document Page 81 of 118

Fill in this	information to iden	ntify your case:	
Debtor 1	Brandon First Name Tonya	Allen Middle Name Draughon Middle Name	Blaisdell Last Name Blaisdell Last Name
1	ing) First Name es Bankruptcy Court for	the: District of Minnesota	
Case number (If known)	per		

Official Form 106H

Schedule H: Your Codebtors

12/15

Codebtors are people or entities who are also liable for any debts you may have. Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the Additional Page, fill it out, and number the entries in the boxes on the left. Attach the Additional Page to this page. On the top of any Additional Pages, write your name and case number (if known) Answer every question.

יטע מו	u have any codebtors? (If you are filing a joint case, do not list either spouse as a	codebior.)
1 No		
_		a vive and territories include
l ithi n rizon	es n the last 8 years, have you lived in a community property state or territory? (na, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washin	gton, and Wisconsin.)
No	o. Go to line 3. es. Did your spouse, former spouse, or legal equivalent live with you at the time?	
	No Yes. In which community state or territory did you live? F	ill in the name and cuπent address of that person.
	Name of your spouse, former spouse, or legal equivalent	
	Number Street	
	City State ZIP Code	
how Sche	olumn 1, list all of your codebtors. Do not include your spouse as a codebtor in in line 2 again as a codebtor only if that person is a guarantor or cosigner. In adule D (Official Form 106D), Schedule E/F (Official Form 106E/F), or Schedule E/F, or Schedule E/F	e G (Official Form 106G). Use Schedule D,
show Sche Sche	vn in line 2 again as a codebtor only if that person is a guarantor of cosignor. Equile D (Official Form 106D), Schedule E/F (Official Form 106E/F), or Schedule	e G (Official Form 106G). Use Schedule D,
show Sche Sche	vn in line 2 again as a codebtor only if that person is a guarantor of cosignon edule D (Official Form 106D), Schedule E/F (Official Form 106E/F), or Schedule edule E/F, or Schedule G to fill out Column 2.	e G (Official Form 106G). Use Schedule D, Column 2: The creditor to whom you owe the de
show Sche Sche	vn in line 2 again as a codebtor only if that person is a guarantor of costynest edule D (Official Form 106D), Schedule E/F (Official Form 106E/F), or Schedule edule E/F, or Schedule G to fill out Column 2.	e G (Official Form 106G). Use Schedule D, Column 2: The creditor to whom you owe the de Check all schedules that apply:
Sche Sche Sche Colt	vn in line 2 again as a codebtor only if that person is a guarantor of costynest edule D (Official Form 106D), Schedule E/F (Official Form 106E/F), or Schedule edule E/F, or Schedule G to fill out Column 2.	e G (Official Form 106G). Use Schedule D, Column 2: The creditor to whom you owe the de Check all schedules that apply: Schedule D, line
Sche Sche Sche Colt	wn in line 2 again as a codebtor only if that person is a guarantor of congress adule D (Official Form 106D), Schedule E/F (Official Form 106E/F), or Schedule edule E/F, or Schedule G to fill out Column 2. wmn 1: Your codebtor me sumper Street	Column 2: The creditor to whom you owe the de Check all schedules that apply: Schedule D, line Schedule E/F, line
Sche Sche Cold	wn in line 2 again as a codebtor only if that person is a guarantor of congress adule D (Official Form 106D), Schedule E/F (Official Form 106E/F), or Schedule edule E/F, or Schedule G to fill out Column 2. wmn 1: Your codebtor me sumper Street	Column 2: The creditor to whom you owe the de Check all schedules that apply: Schedule D, line Schedule E/F, line
Sche Sche Colu	wn in line 2 again as a codebtor only if that person is a guarantor of congress adule D (Official Form 106D), Schedule E/F (Official Form 106E/F), or Schedule edule E/F, or Schedule G to fill out Column 2. wmn 1: Your codebtor me sumper Street	Column 2: The creditor to whom you owe the de Check all schedules that apply: Schedule D, line Schedule E/F, line Schedule G, line
Sche Sche Sche Cold	wn in line 2 again as a codebtor only if that person is a guarantor of codiginate dule D (Official Form 106D), Schedule E/F (Official Form 106E/F), or Schedule edule E/F, or Schedule G to fill out Column 2. wmn 1: Your codebtor me street State ZIP Code	Column 2: The creditor to whom you owe the de Check all schedules that apply: Schedule D, line Schedule E/F, line Schedule G, line
Sche Sche Cold	wn in line 2 again as a codebtor only if that person is a guarantor or congress odule D (Official Form 106D), Schedule E/F (Official Form 106E/F), or Schedule edule E/F, or Schedule G to fill out Column 2.	Column 2: The creditor to whom you owe the de Check all schedules that apply: Schedule D, line Schedule E/F, line Schedule G, line Schedule D, line
Sche Sche Colu	wn in line 2 again as a codebtor only if that person is a guarantor or congress odule D (Official Form 106D), Schedule E/F (Official Form 106E/F), or Schedule edule E/F, or Schedule G to fill out Column 2.	Column 2: The creditor to whom you owe the de Check all schedules that apply: Schedule D, line Schedule E/F, line Schedule G, line Schedule D, line
Sche Sche Cold	wn in line 2 again as a codebtor only if that person is a guarantor or congress odule D (Official Form 106D), Schedule E/F (Official Form 106E/F), or Schedule edule E/F, or Schedule G to fill out Column 2.	Column 2: The creditor to whom you owe the de Check all schedules that apply: Schedule D, line Schedule E/F, line Schedule G, line Schedule D, line Schedule G, line Schedule D, line
Show Sche Sche Cold Nau Nu Cit Cit Na Nu Cit Cit Na Nu Cit Cit Na Nu Cit Cit Na Nu Cit	wn in line 2 again as a codebtor only if that person is a guarantor or congress adule D (Official Form 106D), Schedule E/F (Official Form 106E/F), or Schedule E/F, or Schedule G to fill out Column 2. wmn 1: Your codebtor me Street State ZIP Code ame which is a guarantor or congress.	Column 2: The creditor to whom you owe the de Check all schedules that apply: Schedule D, line Schedule E/F, line Schedule D, line Schedule G, line Schedule E/F, line Schedule E/F, line

Case 19-42048 Doc 1 Filed 07/08/19 Entered 07/08/19 15:15:07 Desc Main Document Page 82 of 118

Blaisdell Case number (if known) Allen Brandon Debtor 1 First Name Additional Page to List More Codebtors Column 2: The creditor to whom you owe the debt Column 1: Your codebtor Check all schedules that apply: ☐ Schedule D, line ___ Name ☐ Schedule E/F, line ___ ☐ Schedule G, line _____ Street Number ZIP Code City Schedule D, line _____ Name ☐ Schedule E/F, line ___ ☐ Schedule G, line ____ Street Number ZIP Code City ☐ Schedule D, line _ Name ☐ Schedule E/F, line ___ ☐ Schedule G, line _____ Number Street ZIP Code State City ☐ Schedule D, line _____ Name ☐ Schedule E/F, line ____ ☐ Schedule G, line ____ Street Number ZIP Code City ☐ Schedule D, line _____ Name ☐ Schedule E/F, line ____ ☐ Schedule G, line _____ Street Number ZIP Code City ☐ Schedule D, line _ ☐ Schedule E/F, line ____ Name ☐ Schedule G, line _____ Number Street ZIP Code State City ☐ Schedule D, line ___ Name ■ Schedule E/F, line ____ ☐ Schedule G, line _____ Street Number ZIP Code State City 3. ☐ Schedule D, line ___ Name ☐ Schedule E/F, line ____ ☐ Schedule G, line _____ Street Number

ZIP Code

City

Fill i	n this ir	formation to ide	entify yo	ır case:							
	de samuele in	Brandon		Allen	Bla	aisdell					
Debte	or 1	First Name		Middle Name	Last N	aisdell					
Debt (Spou	or 2 use, if filing)	Tonya First Name	L	Oraughon Middle Name	Last N						
Unite	ed States	Bankruptcy Court fo	or the: Dis	trict of Minnesota							
	e number				_			i	Check if this		
(If kn	nown)								An amer	nded filing ement showing postpetition cha	apter 13
									income a	as of the following date:	
Offi	cial F	orm 1061							MM / DD	/ YYYY	
		Name and Address of the Owner, where the Party of the Owner, where the Party of the Owner, where the Owner, which is the Owner,	You	Income							12/15
supp If you sepa	dvina ca	orrect intormatic	on, ir you ir spous On the t	e is not filing with yo op of any additional					4	2), both are equally responsible u, include information about yo se. If more space is needed, atta own). Answer every question.	for ur spouse. Ich a
	ill in yo	ur employment				Debtor 1				Debtor 2 or non-filing spous	i e
:	f vou ha	ve more than one	e job,		base						
į	attach a informati employe	separate page witten about addition rs.	ith nal	Employment status			/ed			☐ Employed ☑ Not employed	
		oart-time, season lloyed work.	al, or			Coourity					
1	Occupat	ion may include a maker, if it applie	student	Occupation	-	Security	\ (!!\				
				Employer's name	<u> </u>	Pathfinders	Villag	je			
				Employer's address	.	49200 MN-4 Number Street				Number Street	
					-			······································			
					-	L 12 - 1 - 1 - 1		MN	55037		
					-	Hinkley City	Stat			City State Zi	P Code
				How long employed	d there	? 2 years				2 years	
Ŀ	art 2:	Give Detail	s About	Monthly Income							
	spouse	unless you are s	eparated		nployer,	combine the ir				rite \$0 in the space. Include your i	non-filing
	DGIUW.	n you nood more	-1	·				Fo	r Debtor 1	For Debtor 2 or non-filing spouse	
. 2	. List n deduc	nonthly gross w ctions). If not paid	ages, sai I monthly	ary, and commission calculate what the m	ns (befo	ore all payroll vage would be.	. 2.	\$	1,609.71	\$0.00	
3	3. Estim	nate and list mor	nthly ove	rtime pay.			3.	+\$_	0.00	+ \$	
. 2	4. Calcı	ılate gross inco	me. Add	ine 2 + line 3.			4.	\$	1,609.71	\$0.00	

Case 19-42048 Doc 1 Filed 07/08/19 Entered 07/08/19 15:15:07 Desc Main Document Page 84 of 118

btor 1	Brandon	Allen Last Name	Blaisdell		Cas	e number (if known)					
	First Name Midd	ie Name Last Name			For I	Debtor 1		r Debto n-filing	or 2 or spouse		
Сору	line 4 here		·····-	4.	\$	1,609.71	54010000	\$	0.00		
	II payroll deductions										
		Social Security deduction	ons	5a.	\$	40.51		\$	0.00		
		tions for retirement plar		5b.	\$	0.00		\$	0.00		
		ons for retirement plans		5c.	\$	0,00		\$	0.00		
		ts of retirement fund loa		5d.	\$	0.00		\$	0.00		
	Insurance			5e.	\$	0.00		\$	0.00		
	Domestic support o	bligations		5f.	\$	480.00		\$	260.00		
				5g.	\$	0.00		\$	0.00		
	Union dues	Specify: Mn State Tax		5h.	+\$	18.23	+	\$	0.00		
			5c + 5d + 5e +5f + 5g + 5h.	6.	\$	538.74		\$	260.00		
7. Cal	Iculate total monthly	take-home pay. Subtrac	ct line 6 from line 4.	7.	\$	1,070.97		\$	0.00		
8. List	t all other income re	gularly received:									
8a.	profession, or farm	ntal property and from									
	Attach a statement f receipts, ordinary ar monthly net income.	or each property and bus id necessary business ex	penses, and the total	8a.	\$	0.00		\$	0.00		
8b	Interest and divide	nds		8b.	\$	0.00		\$	0.00		
8c	. Family support pay	yments that you, a non-	filing spouse, or a depend	ent					0.00		
	Include alimony, spo settlement, and pro	ousal support, child suppo perty settlement.	ort, maintenance, divorce	8c.	\$	0.00		\$	0.00		
	l. Unemployment co e. Social Security	mpensation		8d. 8e.	\$ \$	0.00		\$	0.00		
	f. Other government Include cash assista	ich as tood stamps (bene e Program) or housing su	own) of any non-cash assista fits under the Supplemental	ince	\$_	614.00		\$	0.00		
	•			8g	. \$	0.00		\$	0.00		
	g. Pension or retiren			8h	_	0.00		+\$	0.00		
	h. Other monthly inc	come. Specify: Add lines 8a + 8b + 8c +	8d + 8e + 8f +8g + 8h.	- ⁰¹¹ 9.		614.00		\$	0.00		
: 40 C o	vioulate monthly inco	ome. Add line 7 + line 9. 0 for Debtor 1 and Debto		10	o. \$_	1,684.97	+	\$	0.00	\$	1,684.97
11. St	tate all other regular clude contributions fro	contributions to the export an unmarried partner,	penses that you list in Sch members of your household	ı, your	ueper						
D	o not include any amo	os	lines 2-10 or amounts that a						11.	⊦ <u>\$_</u>	0,0
		. Inch column of line 10	to the amount in line 11. The stand Liabilities and Certain	he res n Stati	ult is ti stical l	ne combined m nformation, if it	onth app	ily incon lies	ne. 12.		1,684.9 nbined nthly incom
	Do you expect an inc	crease or decrease with	in the year after you file th	is for	m?						
	Yes. Explain:										

Case 19-42048 Doc 1 Filed 07/08/19 Entered 07/08/19 15:15:07 Desc Main Document Page 85 of 118

Torya Draughon Blaisdell A supplement showing postpetition chapter 13 expenses as of the following date: A supplement showing postpetition chapter 13 expenses as of the following date: A supplement showing postpetition chapter 13 expenses as of the following date: A supplement showing postpetition chapter 13 expenses as of the following date: A supplement showing postpetition chapter 13 expenses as of the following date: A supplement showing postpetition chapter 13 expenses as of the following date: A supplement showing postpetition chapter 13 expenses as of the following date: A supplement showing postpetition chapter 13 expenses as of the following date: A supplement showing postpetition chapter 13 expenses as of the following date: A supplement showing postpetition chapter 13 expenses as of the following date: A supplement showing postpetition chapter 13 expenses as of the following date: A supplement showing postpetition chapter 13 expenses as of the following date: A supplement showing postpetition chapter 13 expenses as of the following date: A supplement showing postpetition chapter 13 expenses as of the following date: A supplement showing postpetition chapter 13 expenses as of the following date: A supplement showing postpetition chapter 13 expenses as of the following date: A supplement showing postpetition chapter 13 expenses as of the following date: A supplement showing postpetition chapter 13 expenses as of the following date: A supplement showing postpetition chapter 13 expenses as of the following date: A supplement showing postpetition chapter 13 expenses as of the following date: A supplement showing postpetition chapter 13 expenses as of the following date: A supplement showing postpetition chapter 13 expenses as of the following date: A supplement showing postpetition chapter 13 expenses as of the following date: A supplement showing postpetition chapter 13 expenses as of the following date: A supplement showing postpetition chapter 13 expen	Debtor 1		ur case:				
Torya Draughon Blaisdell A supplement showing postpetition chapter 13 expenses as of the following date: A supplement showing postpetition chapter 13 expenses as of the following date: A supplement showing postpetition chapter 13 expenses as of the following date: A supplement showing postpetition chapter 13 expenses as of the following date: A supplement showing postpetition chapter 13 expenses as of the following date: A supplement showing postpetition chapter 13 expenses as of the following date: A supplement showing postpetition chapter 13 expenses as of the following date: A supplement showing postpetition chapter 13 expenses as of the following date: A supplement showing postpetition chapter 13 expenses as of the following date: A supplement showing postpetition chapter 13 expenses as of the following date: A supplement showing postpetition chapter 13 expenses as of the following date: A supplement showing postpetition chapter 13 expenses as of the following date: A supplement showing postpetition chapter 13 expenses as of the following date: A supplement showing postpetition chapter 13 expenses as of the following date: A supplement showing postpetition chapter 13 expenses as of the following date: A supplement showing postpetition chapter 13 expenses as of the following date: A supplement showing postpetition chapter 13 expenses as of the following date: A supplement showing postpetition chapter 13 expenses as of the following date: A supplement showing postpetition chapter 13 expenses as of the following date: A supplement showing postpetition chapter 13 expenses as of the following date: A supplement showing postpetition chapter 13 expenses as of the following date: A supplement showing postpetition chapter 13 expenses as of the following date: A supplement showing postpetition chapter 13 expenses as of the following date: A supplement showing postpetition chapter 13 expenses as of the following date: A supplement showing postpetition chapter 13 expen	entor 2		/ (11011		(if this is:		
A supplement showing postpetition chapter 13 expenses as of the following date: A supplement showing postpetition chapter 13 expenses as of the following date: MM / DD / YYYY	epioi 2		Draughon Blaise	dell 🔲 Ar	amended filing		
### September MM / DD / YYYY ### States of people other than Max / DD / YYYY ### States of people other than Max / DD / YYYY ### States of people other than Max / DD / YYYY ### States of people other than Max / DD / YYYY ### States of people other than Max / DD / YYYY ### States of people other than Max / DD / YYYY ### States of people other than Max / DD / YYYY ### States of people other than Max / DD / YYYY ### States of people other than Max / DD / YYYY ### States of people other than Max / DD / YYYY ### States of People of States of People other than Max / DD / YYYY ### States of People of States of People other than Max / DD / Yes ### States of People of States of People other than Max / DD / Yes ### States of People other than Max / DD / Yes ### States of People other than Max / DD / Yes ### States of People other than Max / DD / Yes ### States of People other than Max / DD / Yes ### States of People other than Max / DD / Yes ### States of People other than Max / DD / Yes ### States of People other than Max / DD / Yes ### States of People other than Max / DD / Yes ### States of People other than Max / DD / Yes ### States of People other than Max / DD / Yes ### States of People other than Max / DD / Yes ### States of People other than Max / DD / Yes ### States of People other than Max / DD / Yes ### States of People other than Max / DD / Yes ### States of People other than Max / DD / Yes ### States of People other than DD / Yes ### States of People other than DD / Yes ### States of People other than DD / Yes ### States of People other than DD / D		g) First Name	MADIC FERRIC	L A:	supplement shov penses as of the	ving postpe following o	etition chapter 13 date:
fficial Form 106J chedule J: Your Expenses as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct cormation, if more space is needed, attach another sheet to this form. On the top of any additional pages, write your name and case number known). Answer every question. The image of the imag				M!	M / DD / YYYY		
as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct formation. If more space is needed, attach another sheet to this form. On the top of any additional pages, write your name and case number known). Answer every question. Describe Your Household Describe Your Household	f known)	-					
as complete and accurate as possible. If two married people are filling together, both are equally responsible for supplying correct formation. If more space is needed, attach another sheet to this form. On the top of any additional pages, write your name and case number known). Answer every question. No. Go to line 2. No. Yes. Debtor 2 live in a separate household? No. Yes. Debtor 2 must file Official Form 106.1-2, Expenses for Separate Household of Debtor 2. Do you have dependents? No. No. Yes. Fill out this information for each dependent							12/15
ormation. If more space is needed, attach another sheet to this form. On the copy of known). Answer every question. Statis Describe Your Household	che	dule J: You	r Expenses				
Is this a joint case? No. Go to line 2. Yes. Does Debtor 2 live in a separate household? Yes. Debtor 2 must file Official Form 106J-2, Expenses for Separate Household of Debtor 2. Do you have dependents? No No Holbitor 2. Do not list Debtor 1 and Debtor 2. Do not state the dependents' each dependent. Do not state the dependents' names. Do not state the dependents' names. Do your expenses include expenses of people other than yourself and your dependents? Do your expenses include expenses of people other than yourself and your dependents?	formation	n. If more space is needed Answer every question. -	l, attach another sheet to this	re filing together, both are equ form. On the top of any addit	ually responsible i ional pages, write	your name	and case number
□ No. Go to line 2. □ Yes. Does Debtor 2 live in a separate household? □ Yes. Debtor 2 must file Official Form 106J-2, Expenses for Separate Household of Debtor 2. Do you have dependents? □ No □ yes. Fill out this information for each dependent	art 1:	Describe Your Hous	ehold				
Yes. Does Debtor 2 live in a separate household? No	Is this a j	joint case?					
Do you have dependents? Do not list Debtor 1 and Debtor 2. Do not state the dependents' each dependent. Do not state the dependents' names. Dependent's relationship to Debtor 2 age with you? Dependent's relationship to Debtor 2 age with you? I so daughter I so daughter I so No Yes Aughter I so No Yes	No. Ves.	Go to line 2. Does Debtor 2 live in a se	parate household?				
Do not list Debtor 1 and Debtor 2. Do not state the dependents' names. Do your expenses include expenses of people other than yourself and your dependents? Do your expenses include expenses include expenses Monthly Expenses		☑ No ☐ Yes. Debtor 2 must file	Official Form 106J-2, Expenses	s for Separate Household of De	btor 2.		The state of the s
Debtor 2. Do not state the dependents' names. daughter 1.5 No Yes	Do not list Debtor 1 and Debtor 2. Do not state the dependen		Yes. Fill out this informatio	on for Debtor 1 or Debtor 2			Does dependent I with you?
Do not state the dependents names. daughter 22		2.	each dependent		1.5	5	
Do your expenses include expenses of people other than yourself and your dependents? No Yes No Yes		tate the dependents		daughter		<u>, , , , , , , , , , , , , , , , , , , </u>	□ No
Do your expenses include							
Do your expenses include expenses of people other than yourself and your dependents? No Yes No Yes							☐ Yes
Do your expenses include expenses of people other than yourself and your dependents? On your expenses include expenses inclu							
Do your expenses include expenses of people other than yourself and your dependents? No Yes Fatirets Your Ongoing Monthly Expenses							
expenses of people other than yourself and your dependents? Yes Fatirate Vour Ongoing Monthly Expenses							
yourself and your dependents? — 103		r expenses include					
Estimate Your Ongoing Monthly Expenses	. Do you	es of Deobie outer man	☐ Voc				
	evnens	If and your dependents?	— 165				
	expens yourse Part 2:	If and your dependents?	ing Monthly Expenses	o you are using this form as a	supplement in a	Chapter 13	case to report
expenses as of a date after the bankruptcy is filed. If this is a supplemental <i>Schedule</i> 5, 61668 are better the bankruptcy is filed. If this is a supplemental <i>Schedule</i> 5, 61668 are better the bankruptcy is filed. If this is a supplemental schedule 5, 61668 are better the bankruptcy is filed. If this is a supplemental schedule 5, 61668 are better the bankruptcy is filed. If this is a supplemental schedule 5, 61668 are better the bankruptcy is filed. If this is a supplemental schedule 5, 61668 are better the bankruptcy is filed. If this is a supplemental schedule 5, 61668 are better the bankruptcy is filed. If this is a supplemental schedule 5, 61668 are better the bankruptcy is filed. If this is a supplemental schedule 5, 61668 are better the bankruptcy is filed. If this is a supplemental schedule 5, 61668 are better the bankruptcy is filed.	expens yourse Part 2: Estimate expenses	If and your dependents? Estimate Your Ongo your expenses as of you s as of a date after the bal le date.	ing Monthly Expenses r bankruptcy filing date unles nkruptcy is filed. If this is a su	s you are using this form as a upplemental <i>Schedule J</i> , chec	supplement in a k the box at the to	Chapter 13 op of the fo	case to report rm and fill in the
expenses as of a date after the bankruptcy is filed. If this is a supplemental <i>Schedule</i> 5, 61666 are 5666 and 5666 are	expens yourse art 2: Estimate expenses applicable	Estimate Your Ongo your expenses as of yours as of a date after the balle date.	ing Monthly Expenses r bankruptcy filing date unles nkruptcy is filed. If this is a su	s you are using this form as a upplemental <i>Schedule J</i> , chec se if you know the value of	a supplement in a k the box at the to	•	
expenses as of a date after the bankruptcy is filed. If this is a supplemental schedule 5, check the best and the perfect of applicable date. Include expenses paid for with non-cash government assistance if you know the value of Schedule 1: Your Income (Official Form 1061.)	expens yourse art 2: Estimate expenses applicabl include e such ass 4. The re	Estimate Your Ongoing your expenses as of your expenses as of your expenses as of your expenses as of your expenses paid for with not elistance and have include ental or home ownership	ing Monthly Expenses r bankruptcy filing date unles nkruptcy is filed. If this is a su n-cash government assistance id it on Schedule I: Your Incor	s you are using this form as a upplemental <i>Schedule J</i> , checes if you know the value of me (Official Form 1061.)	100	•	Denses
expenses as of a date after the bankruptcy is filed. If this is a supplemental schedule s, check the bankruptcy is filed. If this is a supplemental schedule s, check the bankruptcy is filed. If this is a supplemental schedule s, check the bankruptcy is filed. If this is a supplemental schedule s, check the bankruptcy is filed. If this is a supplemental schedule s, check the bankruptcy is filed. If this is a supplemental schedule s, check the bankruptcy is filed. If this is a supplemental schedule s, check the bankruptcy is filed. If this is a supplemental schedule s, check the bankruptcy is filed. If this is a supplemental schedule s, check the bankruptcy is filed. If this is a supplemental schedule s, check the bankruptcy is filed. If this is a supplemental schedule s, check the bankruptcy is filed. If this is a supplemental schedule s, check the bankruptcy is filed. If this is a supplemental schedule s, check the bankruptcy is filed. If this is a supplemental schedule s, check the bankruptcy is filed. If this is a supplemental schedule s, check the bankruptcy is filed. If this is a supplemental schedule s, check the bankruptcy is filed. If this is a supplemental schedule s, check the bankruptcy is filed. If this is a supplemental schedule s, check the bankruptcy is filed. If this is a supplemental schedule s, check the bankruptcy is filed. If this is a supplemental schedule specified in the bankruptcy is filed. If this is a supplemental schedule specified in the bankruptcy is filed. If this is a supplemental schedule specified in the bankruptcy is filed. If this is a supplemental schedule specified in the bankruptcy is filed. If this is a supplemental schedule specified in the bankruptcy is filed. If the ba	expens yourse lart 2: Estimate expenses applicabl Include e such ass 4. The reany re	Estimate Your Ongo your expenses as of your s as of a date after the bar le date. expenses paid for with no sistance and have include ental or home ownership ent for the ground or lot.	ing Monthly Expenses r bankruptcy filing date unles nkruptcy is filed. If this is a su n-cash government assistance id it on Schedule I: Your Incor	s you are using this form as a upplemental <i>Schedule J</i> , checes if you know the value of me (Official Form 1061.)	is and 4.	•	nenses 1,250.00
expenses as of a date after the bankruptcy is filed. If this is a supplemental scredule s, check the bankruptcy is filed. If this is a supplemental scredule s, check the bankruptcy is filed. If this is a supplemental scredule s, check the bankruptcy is filed. If this is a supplemental scredule s, check the bankruptcy is filed. If this is a supplemental scredule s, check the bankruptcy is filed. If this is a supplemental scredule s, check the bankruptcy is filed. If this is a supplemental scredule s, check the bankruptcy is filed. If this is a supplemental scredule s, check the bankruptcy is filed. If this is a supplemental scredule s, check the bankruptcy is filed. If this is a supplemental scredule s, check the bankruptcy is filed. If this is a supplemental scredule s, check the bankruptcy is filed. If this is a supplemental scredule s, check the bankruptcy is filed. If this is a supplemental scredule s, check the bankruptcy is filed. If this is a supplemental scredule s, check the bankruptcy is filed. If this is a supplemental scredule s, check the bankruptcy is filed. If this is a supplemental scredule s, check the bankruptcy is filed. If this is a supplemental scredule specified in the supplemental scred	expens yourse lart 2: Estimate expenses applicable include e such ass 4. The reany real if not	Estimate Your Ongo your expenses as of your s as of a date after the bar le date. expenses paid for with no sistance and have include ental or home ownership ent for the ground or lot. t included in line 4:	ing Monthly Expenses r bankruptcy filing date unles nkruptcy is filed. If this is a su n-cash government assistance id it on Schedule I: Your Incor	s you are using this form as a upplemental <i>Schedule J</i> , checes if you know the value of me (Official Form 1061.)	is and 4.	•	1,250.00 0.00
expenses as of a date after the bankruptcy is filed. If this is a supplemental screame 8, check the bankruptcy is filed. If this is a supplemental screame 8, check the bankruptcy is filed. If this is a supplemental screame 8, check the bankruptcy is filed. If this is a supplemental screame 8, check the bankruptcy is filed. If this is a supplemental screame 8, check the bankruptcy is filed. If this is a supplemental screame 8, check the bankruptcy is filed. If this is a supplemental screame 8, check the bankruptcy is filed. If this is a supplemental screame 8, check the bankruptcy is filed. If this is a supplemental screame 8, check the bankruptcy is filed. If this is a supplemental screame 8, check the bankruptcy is filed. If this is a supplemental screame 8, check the bankruptcy is filed. If this is a supplemental screame 8, check the bankruptcy is filed. If this is a supplemental screame 8, check the bankruptcy is filed. If this is a supplemental screame 8, check the bankruptcy is filed. If this is a supplemental screame 8, check the bankruptcy is filed. If this is a supplemental screame 8, check the bankruptcy is filed. If this is a supplemental scream 8, check the bankruptcy is filed. If this is a supplemental scream 8, check the bankruptcy is filed. If this is a supplemental scream 8, check the bankruptcy is filed. If this is a supplemental scream 8, check the bankruptcy is filed. If this is a supplemental scream 8, check the bankruptcy is filed. If this is a supplemental scream 8, check the bankruptcy is filed. If this is a supplemental scream 8, check the bankruptcy is filed. If this is a supplemental scream 8, check the bankruptcy is filed. If th	expens yourse Part 2: Estimate expenses applicable include e such ass 4. The reany r	Estimate Your Ongoing your expenses as of your expenses as of your expenses as of your expenses paid for with not estance and have include ental or home ownership ent for the ground or lot. It included in line 4: Real estate taxes	ing Monthly Expenses r bankruptcy filing date unles: nkruptcy is filed. If this is a su n-cash government assistance id it on Schedule I: Your Income	s you are using this form as a upplemental <i>Schedule J</i> , checes if you know the value of me (Official Form 1061.)	is and 4. 4a. 4b.	•	1,250.00 0.00 0.00

Case 19-42048 Doc 1 Filed 07/08/19 Entered 07/08/19 15:15:07 Page 86 of 118 Document

Case number (if known)_

Blaisdell

Allen

Brandon

Debtor 1 Last Name Middle Name Your expenses 0.00 5. Additional mortgage payments for your residence, such as home equity loans 6. Utilities: 383.00 6a. 6a. Electricity, heat, natural gas 129.00 6b. Water, sewer, garbage collection 330.00 6c. Telephone, cell phone, Internet, satellite, and cable services 0.00 6d Other. Specify: _ 50.00 7. 7. Food and housekeeping supplies 0.00 Childcare and children's education costs 20.00 9. Clothing, laundry, and dry cleaning 20.00 10. Personal care products and services 0.00 11. Medical and dental expenses 360.00 Transportation. Include gas, maintenance, bus or train fare. 12. 12. Do not include car payments. 10.00 13. Entertainment, clubs, recreation, newspapers, magazines, and books 13. 0.00 Charitable contributions and religious donations 15. Do not include insurance deducted from your pay or included in lines 4 or 20. 0.00 15a. 15a. Life insurance 0.00 15b. 15b. Health insurance 108.00 15c. 15c. Vehicle insurance 0.00 15d. 15d. Other insurance, Specify:___ Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20. 0.00 16. Specify: _ 17. Installment or lease payments: 0.00 17a. Car payments for Vehicle 1 0.00 17b. Car payments for Vehicle 2 0.00 17c. Other. Specify:_ 0.00 17d. Other. Specify:_ Your payments of alimony, maintenance, and support that you did not report as deducted from 0.00 your pay on line 5, Schedule I, Your Income (Official Form 106I). 19. Other payments you make to support others who do not live with you. 0.00 20. Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Income. 0.00 20a 20a. Mortgages on other property 0.00 20h. 20b. Real estate taxes 0.00 20c. 20c. Property, homeowner's, or renter's insurance 0.00 20d 20d. Maintenance, repair, and upkeep expenses 0.00 20e. Homeowner's association or condominium dues

Case 19-42048 Doc 1 Filed 07/08/19 Entered 07/08/19 15:15:07 Desc Main Document Page 87 of 118

	randon nst Name Middle Name	Allen Last Name	Blaisdell	Case number (if la	own)		
21. Other. Spe	ecify:			-	21.	+\$	0.00
22a, Add li 22b, Copy	your monthly expennes 4 through 21. line 22 (monthly expenne 22a and 22b. The	enses for Debtor 2)	, if any, from Official Form hly expenses.	106J-2	22a. 22b. 22c.	\$ \$ \$	2,660.00 0.00 2,660.00
23a. Copy 23b. Copy 23c. Subt	your monthly net inc y line 12 (your combir y your monthly expen tract your monthly expressible is your monthly	ned monthly income ses from line 22c a penses from your m	bove.		23a. 23b. 23c.	\$ -\$ \$	2,660.00 -975.03
_	to the consequence to	Enich naving for VOI	ur car loan within the year se of a modification to the	or after you file this form? or do you expect your terms of your mortgage?			

Case 19-42048 Doc 1 Filed 07/08/19 Entered 07/08/19 15:15:07 Desc Main Document Page 88 of 118

Debtor 1	Brandon	Allen	Blaisdell
Jedioi i	First Name	Middle Name	Last Name
Debtor 2	топуа	Draugnon	Biaisdell
(Spouse, if filin		Middle Name	Last Name
(Spouse, if filin	g) First Name		Last Name

☐ Check if this is an amended filing

12/15

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new Summary and check the box at the top of this page.

	Your ass Value of	sets what you own
Schedule A/B: Property (Official Form 106A/B) 1a. Copy line 55, Total real estate, from Schedule A/B	\$	0.00
1b. Copy line 62, Total personal property, from Schedule A/B	\$	35,901.00
1c. Copy line 63, Total of all property on Schedule A/B	\$	35,901.00
Summarize Your Liabilities		
		abilities t you owe
Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) 2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D	\$_	0.00
Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F	. \$_	13,500.00
3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F	+ \$_	169,520.05
Your total liabilities	\$_	183,020.05
art 3: Summarize Your Income and Expenses		
Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I	\$_	1,684.9
. Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22c of Schedule J	\$_	2,660.0

Case 19-42048 Doc 1 Filed 07/08/19 Entered 07/08/19 15:15:07 Desc Main Document Page 89 of 118

Debtor 1	Brandon First Name	Middle Name	Allen Last Name	Blaisdell	С	ase numbe	「 (if known)		
\$				ative and Statistical I	Records	5			
No. No. Yes What kin Your famil	You have noth nd of debt do r debts are pr y, or househol	ing to report or you have? Imarlly consur d purpose." 11	ner debts. Consur U.S.C. § 101(8). Fi Isumer debts. You er schedules.	m. Check this box and sub ner debts are those "incurr Il out lines 8-9g for statistic I have nothing to report on	red by an	individual	primarily for a pers	sonal,	
8. From the Form 122	a Statement o PA-1 Line 11; (f Your Current DR, Form 122B	Monthly Income: Line 11; OR, Form		onthly inc	come from	Official	\$1,684.97	
9. Copy the	following spe	ecial categorie	s of claims from F	art 4, line 6 of Schedule	<i>E/F</i> :				
From Pa	art 4 on <i>Sched</i>	<i>dule E/F</i> , copy	the following:			Total	claim		
9a. Domes	stic support ob	ligations (Copy	line 6a.)			\$	9,905.00		
9b. Taxes	and certain oth	ner debts you o	we the government	. (Copy line 6b.)		\$	0.00		
9c. Claims	for death or pe	ersonal injury w	hile you were intox	icated. (Copy line 6c.)		\$	0.00		
	loans. (Copy	•				\$	32,270.45		
•	(1.5	og.,		orce that you did not repor	t as	\$	0.00		1
9f. Debts to	pension or pr	ofit-sharing pla	ns, and other simila	ar debts. (Copy line 6h.)	+	+ s	0.00		
9g. Total. A	dd lines 9a thr	ough 9f.				\$	42,175.45		
					_				

Case 19-42048 Doc 1 Filed 07/08/19 Entered 07/08/19 15:15:07 Desc Main Document Page 90 of 118

l in this		Allan	Blaisdell			
btor 1	Brandon First Name	Allen Middle Name	Last Name			
ebtor 2 bouse, if filin	Tonya ig) First Name	Draughon Middle Name	Blaisdell Last Name			
ited State	s Bankruptcy Coւ	art for the: District of Minnesota				
se numbe	er					Check if this is an
known)					а	amended filing
fficial	Form 10)7				
ater	nent of	 Financial Affair	s for Indivi	duals Filing for Ban	kruptcy	04/1
art 1:		s About Your Marital Stat				
Manual Ma	arried ot married g the last 3 yea	marital status? ars, have you lived anywhere	other than where yo	u live now?		
Ma No During No Ve	arried ot married g the last 3 yea o es. List all of the					Dates Debtor 2
Ma During No Ye	arried ot married g the last 3 yea	ars, have you lived anywhere	rears. Do not include	where you live now.		lived there
Ma No During No Ve	arried ot married g the last 3 yea o es. List all of the	ars, have you lived anywhere	rears. Do not include	where you live now.		lived there
Ma During No Ye	orried of married g the last 3 year or es. List all of the Debtor 1:	ars, have you lived anywhere e places you lived in the last 3 y ate Highway 18	rears. Do not include	where you live now. Debtor 2: Same as Debtor 1		lived there Same as Debtor From
Ma During No Ye	orried of married g the last 3 year or es. List all of the Debtor 1:	ars, have you lived anywhere e places you lived in the last 3 y	rears. Do not include Dates Debtor 1 lived there	where you live now. Debtor 2: Same as Debtor 1 Number Street		lived there Same as Debtor
Ma During No Ye	or married g the last 3 year s. List all of the Debtor 1:	ars, have you lived anywhere e places you lived in the last 3 y ate Highway 18	Dates Debtor 1 lived there	where you live now. Debtor 2: Same as Debtor 1 Number Street	ZID Code	lived there Same as Debtor From
Ma During No Ye	or married g the last 3 year s. List all of the Debtor 1:	ars, have you lived anywhere e places you lived in the last 3 y ate Highway 18	Dates Debtor 1 lived there	where you live now. Debtor 2: Same as Debtor 1 Number Street	ZIP Code	Iived there Same as Debtor From To
Ma No During No Ve	g the last 3 years on the second of the seco	ars, have you lived anywhere e places you lived in the last 3 y ate Highway 18	Dates Debtor 1 lived there	where you live now. Debtor 2: Same as Debtor 1 Number Street	ZIP Code	Iived there Same as Debtor From To
Ma During No Ye	g the last 3 years of the last 4 years of the	ars, have you lived anywhere e places you lived in the last 3 y ate Highway 18 eet State ZIP Code	Dates Debtor 1 lived there	where you live now. Debtor 2: Same as Debtor 1 Number Street City State Same as Debtor 1	ZIP Code	Same as Debtor From To Same as Debtor
Ma No During No Ve	g the last 3 years of the last 4 years of the	ars, have you lived anywhere e places you lived in the last 3 y ate Highway 18	rears. Do not include Dates Debtor 1 lived there From To 04/01/201	where you live now. Debtor 2: Same as Debtor 1 Number Street City State	ZIP Code	Same as Debtor From To Same as Debtor
Ma No During No Ve	ot married g the last 3 year es. List all of the Debtor 1: 34358 Sta Number Str	ars, have you lived anywhere e places you lived in the last 3 y ate Highway 18 eet State ZIP Code	Pears. Do not include Dates Debtor 1 lived there From To 04/01/201	where you live now. Debtor 2: Same as Debtor 1 Number Street City State Same as Debtor 1	ZIP Code	Same as Debtor From To Same as Debtor

Part 2: Explain the Sources of Your Income

Case 19-42048 Doc 1 Filed 07/08/19 Entered 07/08/19 15:15:07 Desc Main Document Page 91 of 118

ebtor 1 Brandon Allen First Name Middle Name Last No.	Biaisdeil	Case num	ber (if known)	
4. Did you have any income from employment Fill in the total amount of income you received If you are filing a joint case and you have income to the property of the proper	from all lobs and all busili	68868, including pare on	IC GOLLABOR.	dar years?
Yes. Fill in the details.	Debtor 1		Debtor 2	
	Sources of income Check all that apply.	Gross Income (before deductions and exclusions)	Sources of Income Check all that apply.	Gross Income (before deductions and exclusions)
From January 1 of current year until the date you filed for bankruptcy:	Wages, commissions, bonuses, tips	\$6,438.84	Wages, commissions, bonuses, tipsOperating a business	\$0.00
For last calendar year:	✓ Operating a business✓ Wages, commissions, bonuses, tips	s 19,316.52	Wages, commissions, bonuses, tips	\$0.00
(January 1 to December 31,2018	Operating a business	Ψ	Operating a business	
For the calendar year before that:	Wages, commissions, bonuses, tips	\$	Wages, commissions, bonuses, tips	\$
(January 1 to December 31, 2017	Operating a business		Operating a business	
unemployment, and other public benefit payr gambling and lottery winnings. If you are filin List each source and the gross income from No Yes. Fill in the details.	g a joint case and you nav each source separately. D	o not include income that	at you listed in line 4. Debtor 2	
	Sources of income Describe below.	Gross Income from each source (before deductions and exclusions)	Sources of income Describe below.	Gross Income from each source (before deductions an exclusions)
From January 1 of current year until		\$		- \$
the date you filed for bankruptcy:		\$ \$		- \$
		\$		\$
For last calendar year: (January 1 to December 31, 2018		\$		T
Yearnes, MM				- \$
		\$		- \$ - \$
For the calendar year before that:		\$ \$		\$\$ \$\$
For the calendar year before that: (January 1 to December 31,2017)		\$ \$		- \$

Case 19-42048 Doc 1 Filed 07/08/19 Entered 07/08/19 15:15:07 Desc Main Document Page 92 of 118

Debtor 1	Brando	on	Allen		Blaisdell	Case nu	mber (if known)	
Jenior (First Name	Middle Name	Las	t Name				
	-							
Part 3:	List Co	ertain Payme	nts You M	ade Before	You Filed f	or Bankruptcy		
e Aros	sither Deht	or 1's or Debto	or 2's debts	primarily cor	nsumer debts	?		
g, Alex		Dahlar 4 par	Dobtor 2 ha	e nrimarily c	onsumer deb	ts. Consumer debts are	defined in 11 U.S.C. § 101	(8) as
U f	"inour	hivihni ne va ba	uai nrimatiiv	tor a persona	n, rannny, or ne	machold purposs.		
	During	the 90 days be	fore you filed	for bankrupt	cy, did you pa	y any creditor a total of S	66,425* or more?	
	□ No	. Go to line 7.						
			ch creditor to	n whom you D	aid a total of	66,425* or moré in one c	r more payments and the	
		total amount	you paid that	t creditor. Do Also, do not	not include pa include paym	ents to an attorney for the	nis bankruptcy case.	
	* Subj	ect to adjustme	nt on 4/01/19	and every 3	years after the	at for cases filed on or a	ter the date of adjustment.	
		or 1 or Debtor 2						
	Yes. Debto	the 90 days be	efore you file	d for bankrup	tcy, did you pa	y any creditor a total of	\$600 or more?	
			,					
		o. Go to line 7.				**************************************	tal amount you naid that	
	☐ Ye	194	wat include n	aumonte tat (iomesiic suuu	OH ODNIGATIONS, SUCH AS	tal amount you paid that child support and	
		alimony. Als	o, do not incl	ude payment	s to an attorne	ey for this bankruptcy ca	se.	
					m 1 **	Total amount paid	Amount you still owe	Was this payment for
					Dates of payment	i Otal amount paid	, ,	
						•	\$. Mortgage
		Creditor's Name				\$	Φ	Car
		Citation a rise						Credit card
		Number Street	·					Loan repayment
								Suppliers or vendors
								Other
		City	State	ZIP Code				Other
						\$	\$	_
		Creditor's Name						☐ Car
								Credit card
		Number Street						Loan repayment
						•		Suppliers or vendors
		_						Other
		City	State	ZIP Code				
						\$	<u> </u>	Mortgage
		Creditor's Name						🚨 Çar
						-		Credit card
		Number Street						Loan repayment
						_		Suppliers or vendor
								Other
		City	State	ZIP Code				

Case 19-42048 Doc 1 Filed 07/08/19 Entered 07/08/19 15:15:07 Desc Main Document Page 93 of 118

	Brandon	Allen	Blaisdell	Ca	ase number (if known)	
tor 1	First Name Middle	Name Last Name				
Inside corpo agent such	ers include your relative prations of which you a t, including one for a back as child support and a	are an officer, director, ousiness you operate a	ers; relatives of any go	emeral partition, par	ore of their voting s	no was an insider? you are a general partner; ecurities; and any managing domestic support obligations,
⊠ N	lo 'es. List all payments	to an insider.	Dates of payment	Total amount pald	owe	Reason for this payment
	Insider's Name			\$	\$	
	Number Street				and a control of the	
	City	State ZiP Cod	le .			
	Ludded Namo			\$	\$	
	Insider's Name Number Street					
	City	State ZIP Co	de			
an Incl ☑	insider? lude payments on deb	u filed for bankruptcy ots guaranteed or cosig s that benefited an ins	ned by an insider.	payments or trans Total amount paid	fer any property o Amount you still owe	n account of a debt that benefited Reason for this payment Include creditor's name
	Insider's Name			\$	\$	
	Number Street					
	City	State ZIP C	ode			
	Insider's Name			\$	\$	
	Number Street			-		

Case 19-42048 Doc 1 Filed 07/08/19 Entered 07/08/19 15:15:07 Desc Main Document Page 94 of 118

Brandon	Allen	Blaisdell	Case number (if known	n)	
	e Name Last Nam	е			
_		_			
		4 1	account action or adm	inistrative proceed	ing?
in 1 year before you	filed for bankruptcy	, were you a party in any i ases, small claims actions, (awsuit, court action, or admidivorces, collection suits, pate	rnity actions, suppo	t or custody modifications
	ung personal many of	,			
lo					
es. Fill in the details.			Court or agency		Status of the case
	!	Nature of the case	Court or agency		
0 1711-			Court Name		Pending
Case title					On appeal
			Number Street		Concluded
Case number			Oth	tate ZIP Code	
			City		
					Pending
Case title			Court Name		On appeal
	:		Number Street		Concluded
Casa number					
Case fluitiber			City	State ZIP Code	
	ation below.	Describe the pro	perty	Date	Value of the property
					\$
Creditor's Name		:			
Number Street		Explain what hap	ppened		
	State ZID C				
City	State ZIP C			Date	Value of the propert
		!			
					\$
Creditor's Name					
Number Street		Explain what ha	ppened		
City	State ZIP	Code Property	vas gamisned. vas attached, seized, or levied	i.	
	Identify Legal A in 1 year before you ill such matters, inclusiontract disputes. Ito Yes. Fill in the details. Case title Case number Case number Case number Case number Case number Case number Street Creditor's Name Number Street Creditor's Name Number Street	Identify Legal Actions, Reposses in 1 year before you filed for bankruptcy and such matters, including personal injury contract disputes. Identify Legal Actions, Reposses in 1 year before you filed for bankruptcy contract disputes. Identify Legal Actions, Reposses in 1 year before you filed for bankruptcy contract disputes. Identify Legal Actions, Reposses in 1 year before you filed for bankruptcy contract disputes. Identify Legal Actions, Reposses in 1 year before you filed for bankruptcy contract disputes. Identify Legal Actions, Reposses in 1 year before you filed for bankruptcy contract disputes. Identify Legal Actions, Reposses in 1 year before you filed for bankruptcy contract disputes. Identify Legal Actions, Reposses in 1 year before you filed for bankruptcy contract disputes. Identify Legal Actions, Reposses in 1 year before you filed for bankruptcy contract disputes. Identify Legal Actions, Reposses in 1 year before you filed for bankruptcy contract disputes. Identify Legal Actions, Reposses in 1 year before you filed for bankruptcy contract disputes. Identify Legal Actions, Reposses in 1 year before you filed for bankruptcy contract disputes in 1 year before you filed for bankruptcy contract disputes in 1 year before you filed for bankruptcy contract disputes in 1 year before you filed for bankruptcy contract disputes in 1 year before you filed for bankruptcy contract disputes in 1 year before you filed for bankruptcy contract disputes in 1 year before you filed for bankruptcy contract disputes in 1 year before you filed for bankruptcy contract disputes in 1 year before you filed for bankruptcy contract disputes in 1 year before you filed for bankruptcy contract disputes in 1 year before you filed for bankruptcy contract disputes in 1 year before you filed for bankruptcy contract disputes in 1 year before you filed for bankruptcy contract disputes in 1 year before you filed for bankruptcy contract disputes in 1 year before you filed for bankruptcy contract disputes in 1 year before you fil	Identify Legal Actions, Repossessions, and Foreclosure in 1 year before you filed for bankruptcy, were you a party in any I ill such matters, including personal injury cases, small claims actions, contract disputes. Identify the case	Identify Legal Actions, Repossessions, and Foreclosures In year before you filled for bankruptcy, were you a party in any lawauit, court action, or admit abunt matters, including personal injury cases, small claims actions, divorces, collection suits, pale contract disputes. In year before you filled for bankruptcy, was any of the case	Identify Legal Actions, Repossessions, and Foreclosures In 1 year before you filed for bankruptcy, were you a party in any lawsuit, court action, or administrative proceed it such matters, including personal injury cases, small claims actions, divorces, collection suits, paternity actions, support on the case of the

Case 19-42048 Doc 1 Filed 07/08/19 Entered 07/08/19 15:15:07 Desc Main Document Page 95 of 118

Within 90 days before you filed for bankruptcy, did any creditor, including a bank or financial institution, set off any amounts from your accounts or of use to make a payment because you owed a debt? No Yes, Fill in the details. Describe the sction the creditor took Describe the sction the creditor took Date action Amount was taken Describe the sction the creditor took Date action Amount was taken S	ebtor 1	Brandon	Allen	Blaisdell	Case number (if known)
accounts or refuse to make a payment because you over a seas. No Yes, Fill in the details.	IDIOI 1		le Name Last Nam	ee ·	
accounts or refuse to make a payment because you over a seas. No Yes, Fill in the details.					
accounts or refuse to make a payment because you over a seas. No Yes, Fill in the details.	ı. With	nin 90 days before yo	ou filed for bankrupte	cy, did any creditor, includin	g a bank or financial institution, set off any amounts from your
Describe the action the creditor took Date action was taken Amount was taken Creditor's Name Number Street Number Street Date action the creditor took Date action was taken Amount was taken S Amount Amount was taken S Amount was taken S Amount was taken Amount was taken S Amount was taken Amount was	acco	ounts or refuse to m	ake a payment becau	ise you owed a debt?	
Describe the action the creditor took Data action was taken Amount was taken Amount was taken S					
Describe the action the creditor took was taken	U,	Yes. Fill in the details.			Date action Amount
Number Street S				Describe the action the credito	Jr TOOK
Number Street	;	Creditor's Name	:		
2. Within 1 year before you filed for bankruptcy, was any of your property in the possession of an assignee for the benefit of craditors, a court-appointed receiver, a custodian, or another official? No					\$
2. Within 1 year before you filed for bankruptcy, was any of your property in the possession of an assignee for the benefit of creditors, a court-appointed receiver, a custodian, or another official? No		Number Street			
2. Within 1 year before you filed for bankruptcy, was any of your property in the possession of an assignee for the benefit of creditors, a court-appointed receiver, a custodian, or another official? No					
2. Within 1 year before you filed for bankruptcy, was any of your property in the possession of an assignee for the benefit of creditors, a court-appointed receiver, a custodian, or another official? No					
No Yes Value Yes		City	State ZIP Code	Last 4 digits of account num	ber: XXXX
No Yes Value Yes					to the bonefit of
Sits Certain Giffs and Contributions			iineu ieceiyei, a vac		
3. Within 2 years before you filed for bankruptcy, did you give any gifts with a total value of more than \$600 per person? No		Yes			
3. Within 2 years before you filed for bankruptcy, did you give any gifts with a total value of more than \$600 per person? No			liffe and Contribut	ions	
No Sits with a total value of more than \$600 per person Person to Whom You Gave the Gitt Number Street Gitts with a total value of more than \$600 per person Person's relationship to you Gitts with a total value of more than \$600 per person Person to Whom You Gave the Gitt Number Street Dates you gave the Gitt S Dates you gave the Gitts with a total value of more than \$600 per person Person's relationship to you Situate ZiP Code Person's relationship to you Situate XiP Code Person's relationship to you Situate XiP Code Situate XiP					
No Sits with a total value of more than \$600 per person Person to Whom You Gave the Gitt Number Street Gitts with a total value of more than \$600 per person Person's relationship to you Gitts with a total value of more than \$600 per person Person to Whom You Gave the Gitt Number Street Dates you gave the Gitt S Dates you gave the Gitts with a total value of more than \$600 per person Person's relationship to you Situate ZiP Code Person's relationship to you Situate XiP Code Person's relationship to you Situate XiP Code Situate XiP	40 1866	thin 2 years hefore V	ou filed for bankrupt	cy, did you give any gifts wi	ith a total value of more than \$600 per person?
Gifts with a total value of more than \$600 per person Describe the gifts Describe the gifts Dates you gave the gifts S					
City State ZiP Code Person's relationship to you Gifts with a total value of more than \$600 per person Describe the gifts Dates you gave the gifts S			s for each gift.		
Describe the gifts Person to Whom You Gave the Gift S	_				Dates you gave Value
Person to Whom You Gave the Gift Number Street			ue of more than \$600	Describe the gifts	
Number Street City State ZIP Code Person's relationship to you Gifts with a total value of more than \$600 per person Person to Whom You Gave the Gift Number Street Number Street		put potenti			
Number Street City State ZIP Code Person's relationship to you Gifts with a total value of more than \$600 per person Person to Whom You Gave the Gift Number Street Number Street				·	\$
City State ZIP Code Person's relationship to you Gifts with a total value of more than \$600 per person Person to Whom You Gave the Gift Number Street Dates you gave Value the gifts \$		Person to Whom You Gav	e the Gift		1
City State ZIP Code Person's relationship to you Gifts with a total value of more than \$600 per person Person to Whom You Gave the Gift Number Street Dates you gave Value the gifts \$				- :	
City State ZIP Code Person's relationship to you Gifts with a total value of more than \$600 per person Person to Whom You Gave the Gift Number Street Dates you gave Value the gifts \$		_			
Person's relationship to you Gifts with a total value of more than \$600 per person Person to Whom You Gave the Gift Number Street Dates you gave the gifts S		Number Street		- : 	
Person's relationship to you Gifts with a total value of more than \$600 per person Person to Whom You Gave the Gift Number Street Dates you gave the gifts S				<u>.</u>	
Gifts with a total value of more than \$600 per person Person to Whom You Gave the Gift Number Street Dates you gave the gifts \$		City	State ZIP Code		
Gifts with a total value of more than \$600 per person Person to Whom You Gave the Gift Number Street Dates you gave the gifts \$		Person's relationship t	to you	=	
Gifts with a total value of more than \$600 per person Person to Whom You Gave the Gift Number Street Describe the gifts the gifts \$					
Person to Whom You Gave the Gift \$ Number Street			ue of more than \$600	Describe the glfts	Date jen gen-
Number Street		per person			
Number Street					\$
		Person to Whom You Ga	we the Gift		
					\$
City State ZIP Code		Number Street			
CITY CIRIO BIL 5777		01	State 7IP Code	 !	
		City	Olitic Til CARA		

Case 19-42048 Doc 1 Filed 07/08/19 Entered 07/08/19 15:15:07 Desc Main Document Page 96 of 118

	Brandon	Allen Last Na	Blaisdell	Case number (if known)		
	First Name Middle	e Name Last N				
Nith	ոin 2 years before you	ı filed for bankrupt	cy, did you give any gifts or co	ntributions with a total valu	e of more than \$600	to any charity?
Ø.				`		
	Yes. Fill in the details f	for each gift or contr	ibution.			
					Date you	Value
	Gifts or contributions that total more than \$6	to charities :00	Describe what you contributed		contributed	
	tilat total more than 40					
						\$
	Charity's Name					
	J					\$
	Number Street					
	7	IP Code				
	City State Z	ir Code				
ırt (6: List Certain I	Losses				
	* <u>*</u>		tcy or since you filed for bankr			
	saster, or gambling?					
	Yes. Fill in the details	5.				
	Describe the property	v vou lost and	Describe any insurance covers	ge for the loss	Date of your loss	Value of property lost
	how the loss occurre	d	Include the amount that insurance	e has paid. List pending insurance	1033	
	HOW the loss occurre			3; Property.		
	HOM the loss occurre		claims on line 33 of Schedule A/			
	HOW the loss occurre		claims on line 33 of Schedule All			\$
	How the loss occurre		claims on line 33 of Schedule All			\$
	Now the loss occurre		claims on line 33 of Schedule All			\$
						\$
art	7. List Certain F	Payments or Tra	nsfers	en e		\$
0.15	7: List Certain F	Payments or Tra	nsfers otcv. did you or anyone else ac	ting on your behalf pay or ti	ansfer any property	\$to anyone
6. W	7: List Certain F	Payments or Trai	nsfers otcy, did you or anyone else ac	ting on your behalf pay or to		\$to anyone
6. W ye In	7: List Certain F Vithin 1 year before you consulted about s include any attorneys, b	Payments or Trai	nsfers otcv. did you or anyone else ac	ting on your behalf pay or to		\$to anyone
6. W y In	7: List Certain F lithin 1 year before you consulted about s include any attorneys, b	Payments or Trai ou filed for bankrup eeking bankruptcy ankruptcy petition p	nsfers otcy, did you or anyone else ac	ting on your behalf pay or to		\$to anyone
6. W y In	7: List Certain F Vithin 1 year before you consulted about s include any attorneys, b	Payments or Trai ou filed for bankrup eeking bankruptcy ankruptcy petition p	nsfers otcy, did you or anyone else ac or preparing a bankruptcy pet reparers, or credit counseling ag	ting on your behalf pay or to ition? encies for services required in	your bankruptcy.	
6. W y In	List Certain F Vithin 1 year before you consulted about s include any attorneys, b No Yes. Fill in the detail	Payments or Trai ou filed for bankrup eeking bankruptcy ankruptcy petition p	nsfers otcy, did you or anyone else ac	ting on your behalf pay or to ition? encies for services required in property transferred		to anyone Amount of paymen
6. W y In	7: List Certain F lithin 1 year before you consulted about s include any attorneys, b	Payments or Trai ou filed for bankrup eeking bankruptcy ankruptcy petition p	nsfers otcy, did you or anyone else ac or preparing a bankruptcy pet reparers, or credit counseling ag	ting on your behalf pay or to ition? encies for services required in	your bankruptcy. Date payment or transfer was	
6. W y In	7: List Certain F Vithin 1 year before you consulted about s nclude any attorneys, b No Yes. Fill in the detail	Payments or Trai ou filed for bankrup eeking bankruptcy ankruptcy petition p	nsfers otcy, did you or anyone else ac or preparing a bankruptcy pet reparers, or credit counseling ag	ting on your behalf pay or to ition? encies for services required in property transferred	your bankruptcy. Date payment or transfer was	
6. W y In	List Certain F Vithin 1 year before you consulted about s include any attorneys, b No Yes. Fill in the detail	Payments or Trai ou filed for bankrup eeking bankruptcy ankruptcy petition p	nsfers otcy, did you or anyone else ac or preparing a bankruptcy pet reparers, or credit counseling ag	ting on your behalf pay or to ition? encies for services required in property transferred	your bankruptcy. Date payment or transfer was	
6. W y In	7: List Certain F Vithin 1 year before you consulted about s nclude any attorneys, b No Yes. Fill in the detail	Payments or Trai ou filed for bankrup eeking bankruptcy ankruptcy petition p	nsfers otcy, did you or anyone else ac or preparing a bankruptcy pet reparers, or credit counseling ag	ting on your behalf pay or to ition? encies for services required in property transferred	your bankruptcy. Date payment or transfer was	
6. W y In	7: List Certain F Vithin 1 year before you consulted about s nclude any attorneys, b No Yes. Fill in the detail	Payments or Trai ou filed for bankrup eeking bankruptcy ankruptcy petition p	nsfers otcy, did you or anyone else ac or preparing a bankruptcy pet reparers, or credit counseling ag	ting on your behalf pay or to ition? encies for services required in property transferred	your bankruptcy. Date payment or transfer was	
6. W y In	7: List Certain F Vithin 1 year before you consulted about s nclude any attorneys, b No Yes. Fill in the detail	Payments or Trai ou filed for bankrup eeking bankruptcy ankruptcy petition p	nsfers otcy, did you or anyone else ac or preparing a bankruptcy pet reparers, or credit counseling ag	ting on your behalf pay or to ition? encies for services required in property transferred	your bankruptcy. Date payment or transfer was	
6. W y In	7: List Certain F Vithin 1 year before you consulted about s include any attorneys, b No Yes. Fill in the detail Person Who Was Paid Number Street	Payments or Training for the parties of the parties	nsfers otcy, did you or anyone else ac or preparing a bankruptcy pet reparers, or credit counseling ag	ting on your behalf pay or to ition? encies for services required in property transferred	your bankruptcy. Date payment or transfer was	
y In	7: List Certain F Vithin 1 year before you consulted about s include any attorneys, b No Yes. Fill in the detail Person Who Was Paid Number Street	Payments or Training the filed for bankruptcy pankruptcy petition pairs. State ZIP Code	nsfers otcy, did you or anyone else ac or preparing a bankruptcy pet reparers, or credit counseling ag	ting on your behalf pay or to ition? encies for services required in property transferred	your bankruptcy. Date payment or transfer was	

Case 19-42048 Doc 1 Filed 07/08/19 Entered 07/08/19 15:15:07 Desc Main Document Page 97 of 118

	Brandon First Name M	Allen Iddle Name Last Na	Blaisdell	Case number (if known)		
	rast varie	COLO TEORN			the former and confirming of the contract first contract the former and contract the contract of the contract	e Stellander e Trad Stelland e Stelland dans Stelland Stelland Stelland e e e e e e e e e e e e e e e e e e e
	ggg a sa gar maganana , magana	y managan ay managan a	Description and value of any property to	ransferred	Date payment or transfer was made	Amount of payment
Pe	erson Who Was Paid					\$
Nu	umber Street			! ! !		\$
Ci	ity	State ZIP Code				
Ē	mail or website addres	S				
	Person Who Made the I		cy, did you or anyone else acting on			
a N		ment or transfer that y	Description and value of any property	transferred	Date payment or transfer was	Amount of pa
	Person Who Was Paid	1	-		made	
	Number Street		-			\$
			-			\$
		State ZIP Code	-			
With trans	City In 2 years before sferred in the or	e you filed for bankru	iptcy, did you sell, trade, or otherwis r business or financial affairs?	e transfer any property of a security interest or	to anyone, other to mortgage on your p	nan property
trans Inclu Do n	In 2 years before sferred in the or- ide both outright to not include gifts and	e you filed for bankru dinary course of you transfers and transfers nd transfers that you ha	iptcy, did you sell, trade, or otherwise business or financial affairs? made as security (such as the granting ave already listed on this statement.	e transfer any property g of a security interest or	to anyone, other t	nan property
trans Inclu Do n	iln 2 years before sferred in the or ide both outright t not include gifts an	e you filed for bankru dinary course of you transfers and transfers nd transfers that you ha	made as security (such as the granting	e transfer any property g of a security interest or Describe any propert or debts paid in exch	mortgage on your p y or payments receiv	roperty). ed Date tran
trans Inclu Do n	In 2 years before sferred in the or- ide both outright to not include gifts and	e you filed for bankru dinary course of you transfers and transfers nd transfers that you ha tails.	made as security (such as the granting ave already listed on this statement. Description and value of property	of a security interest or Describe any propert	mortgage on your p y or payments receiv	roperty). ed Date trar
trans Inclu Do n	in 2 years before serred in the or- ide both outright to include gifts and No Yes. Fill in the de	e you filed for bankru dinary course of you transfers and transfers nd transfers that you ha tails.	made as security (such as the granting ave already listed on this statement. Description and value of property	of a security interest or Describe any propert	mortgage on your p y or payments receiv	roperty). ed Date trar
trans Inclu Do n	In 2 years before sterred in the ordered in the ordered in the ordered include gifts and No Yes. Fill in the detection who Receives	e you filed for bankru dinary course of you transfers and transfers nd transfers that you ha tails.	made as security (such as the granting ave already listed on this statement. Description and value of property	of a security interest or Describe any propert	mortgage on your p y or payments receiv	roperty). ed Date trar
trans Inclu Do n	In 2 years before sterred in the oracle both outright to include gifts at No Yes. Fill in the defendence with the steel of the person who Receive Number Street	e you filed for bankru dinary course of your transfers and transfers and transfers that you he tails. d Transfer	made as security (such as the granting ave already listed on this statement. Description and value of property	of a security interest or Describe any propert	mortgage on your p y or payments receiv	roperty). ed Date trar
trans Inclu Do n	In 2 years before sterred in the or ide both outright to include gifts and No Yes. Fill in the defendence when the street City	e you filed for bankru dinary course of you transfers and transfers and transfers that you ha tails. d Transfer State ZIP Code	made as security (such as the granting ave already listed on this statement. Description and value of property	of a security interest or Describe any propert	mortgage on your p y or payments receiv	roperty). ed Date trar
trans Inclu Do n	In 2 years before sterred in the oracle both outright to the include gifts and Yes. Fill in the defendence with the defendence	e you filed for bankru dinary course of you transfers and transfers and transfers that you ha tails. d Transfer State ZIP Code	made as security (such as the granting ave already listed on this statement. Description and value of property	of a security interest or Describe any propert	mortgage on your p y or payments receiv	roperty).
trans Inclu Do n	In 2 years before sterred in the ordered in the ordered both outright to include gifts and No Yes. Fill in the deserged with the deserged by the street of the control of t	e you filed for bankru dinary course of you transfers and transfers and transfers that you ha tails. d Transfer State ZIP Code	made as security (such as the granting ave already listed on this statement. Description and value of property	of a security interest or Describe any propert	mortgage on your p y or payments receiv	roperty). ed Date trar

Case 19-42048 Doc 1 Filed 07/08/19 Entered 07/08/19 15:15:07 Desc Main Document Page 98 of 118

or 1	Brandon First Name Middle	Allen Lest Name	Blaisdell	Case number (if know	n)	
	LH2f14Sting Minns					
With	in 10 years before vo	ou filed for bankrupt	cy, did you transfer any proper	ty to a self-settled trust	t or similar device of wh	nich you
are a	a beneficiary? (These	are often called asse	et-protection devices.)			
Z	чo					
	es. Fill in the details.					
			Description and value of the prop	erty transferred		Date transfer was made
!	Name of trust					
						1
•						
Acceptance of	estimates of the feet and the second	and the second of the second s		A Baves and Stores	e Units	
rt 8	List Certain Fir	ancial Accounts,	, Instruments, Safe Deposi	t Boxes, and otoray		hanafit
Wit	hin 1 vear before vot	ı filed for bankruptc	y, were any financial accounts	or instruments held in	your name, or for your	Delletti,
	bdimm couln	ac money market (or other financial accounts; cel	tificates of deposit; sin inancial institutions.	ares in banks, credit un	10110,
_		sion funds, coopera	tives, associations, and other i	manda.		
	No Yes, Fill in the detai	le				
u	Yes, Fill III ule detai	13.	Last 4 digits of account number	Type of account or	Date account was	Last balance before
			Last 4 digita of 20002.	Instrument	closed, sold, moved, or transferred	closing or transfer
	Name of Financial Institu	ition	xxxx	☐ Checking		\$
	Number Street			☐ Savings		
	Mullipel Street			Money market		
				Brokerage		
	City	State ZIP Code		Other		
				Checking		\$
	Name of Financial Instit	ution	XXXX	Savings	······································	V
	Name of Financial men			Money market		
	Number Street			Brokerage		
				Other		
		State ZIP Code		ent Onial	•	
	City			tau anu aafa danas	it hav ar other deposite	rv for
1. D	o you now have, or d	iid you have within 1	l year before you filed for bank	ruptcy, any sale depos	it box of other aspesses	
	ecurities, cash, or of No	ner valuables :				
	1 NO] Yes, Fill in the deta	ils.				
-	a res. rm m die dea		Who else had access to it?	Describe	the contents	Do you s have it?
						□ No
						Yes
	Name of Financial Inst	itution	Name			↓ 3
			Number Street	i i		
	Number Street		William Shear			
	<u> </u>		City State ZIP Code			
	City	State ZIP Code				

Case 19-42048 Doc 1 Filed 07/08/19 Entered 07/08/19 15:15:07 Desc Main Document Page 99 of 118

No Yes. Fill in the details.	Who else has or had access to it?	Describe the contents	Do you st have it?
			□ No
Name of Storage Facility	Name		☐ Yes
Number Street	Number Street		
	CityState ZiP Code		
City State ZIP Code 9: Identify Property You Hol	d or Control for Someone Else	:	
o you hold or control any property tha	at someone else owns? Include any pro	perty you borrowed from, are storing f	or,
r hold in trust for someone. No			
Yes, Fill in the details.	Where is the property?	Describe the property	Value
Owner's Name	_		\$
Number Street	Number Street		
Number Street		iode	
City State ZIP Code	City State ZIP C	ode	
City State ZIP Code t 10: Give Details About Envir	City State ZIP Conmental Information	ode	
t 10: Give Details About Envir the purpose of Part 10, the following of Environmental law means any federal, hazardous or toxic substances, waste	city State ZIP Conmental Information definitions apply: state, or local statute or regulation cors, or material into the air, land, soil, surrolling the cleanup of these substances	icerning pollution, contamination, rele face water, groundwater, or other med , wastes, or material.	
City State ZIP Code 110: Give Details About Environmental law means any federal, mazardous or toxic substances, waste including statutes or regulations controlling it or used to own, operate, or utilize it or used to own.	e City State ZIP Conmental Information definitions apply: state, or local statute or regulation cor s, or material into the air, land, soil, sur rolling the cleanup of these substances operty as defined under any environme tilize it, including disposal sites.	ocerning pollution, contamination, rele face water, groundwater, or other med i, wastes, or material. ntal law, whether you now own, opera	te, or
City State ZIP Code to 10: Give Details About Environmental law means any federal, hazardous or toxic substances, waste including statutes or regulations control Site means any location, facility, or pro- utilize it or used to own, operate, or utilize it or used to own, anything a	e City State ZIP Conmental Information definitions apply: state, or local statute or regulation cores, or material into the air, land, soil, surrolling the cleanup of these substances operty as defined under any environme tilize it, including disposal sites.	ocerning pollution, contamination, rele face water, groundwater, or other med i, wastes, or material. ntal law, whether you now own, opera	te, or
City State ZIP Code to 10: Give Details About Environmental law means any federal, hazardous or toxic substances, waste including statutes or regulations controllize it or used to own, operate, or utilize it or used to own, operate, or utilized it or	e City State ZIP Conmental Information definitions apply: state, or local statute or regulation cons, or material into the air, land, soil, sur rolling the cleanup of these substances operty as defined under any environme tilize it, including disposal sites. n environmental law defines as a hazar ant, contaminant, or similar term.	icerning pollution, contamination, rele- face water, groundwater, or other med , wastes, or material. ntal law, whether you now own, opera dous waste, hazardous substance, tox	te, or
City State ZIP Code to 10: Give Details About Environmental law means any federal, nazardous or toxic substances, waste including statutes or regulations conti- Site means any location, facility, or pro- utilize it or used to own, operate, or utilized it or utilized i	e City State ZIP Conmental Information definitions apply: state, or local statute or regulation cors, or material into the air, land, soil, sur rolling the cleanup of these substances operty as defined under any environme tilize it, including disposal sites. n environmental law defines as a hazar ant, contaminant, or similar term.	icerning pollution, contamination, rele- face water, groundwater, or other med , wastes, or material. ntal law, whether you now own, opera dous waste, hazardous substance, tox	te, or
Give Details About Environmental law means any federal, hazardous or toxic substances, waste including statutes or regulations controllize it or used to own, operate, or utilize it o	e City State ZIP Conmental Information definitions apply: state, or local statute or regulation cons, or material into the air, land, soil, sur rolling the cleanup of these substances operty as defined under any environme tilize it, including disposal sites. n environmental law defines as a hazar ant, contaminant, or similar term.	icerning pollution, contamination, rele- face water, groundwater, or other med , wastes, or material. ntal law, whether you now own, opera dous waste, hazardous substance, tox	te, or
t 10: Give Details About Environmental law means any federal, hazardous or toxic substances, waste including statutes or regulations controllize it or used to own, operate, or utilize it or used to own, operate, o	e City State ZIP Conmental Information definitions apply: state, or local statute or regulation cores, or material into the air, land, soil, surrolling the cleanup of these substances operty as defined under any environme tilize it, including disposal sites. n environmental law defines as a hazarant, contaminant, or similar term.	icerning pollution, contamination, rele- face water, groundwater, or other med , wastes, or material. ntal law, whether you now own, opera dous waste, hazardous substance, tox	te, or
City State ZIP Code the purpose of Part 10, the following of Environmental law means any federal, hazardous or toxic substances, waste including statutes or regulations control Site means any location, facility, or produtilize it or used to own, operate, or ut Hazardous material means anything a substance, hazardous material, pollut port all notices, releases, and proceed Has any governmental unit notified you	e City State ZIP Conmental Information definitions apply: state, or local statute or regulation cors, or material into the air, land, soil, surrolling the cleanup of these substances operty as defined under any environme tilize it, including disposal sites. In environmental law defines as a hazar ant, contaminant, or similar term. lings that you know about, regardless on that you may be liable or potentially it.	icerning pollution, contamination, rele- face water, groundwater, or other med , wastes, or material. ntal law, whether you now own, opera- dous waste, hazardous substance, too if when they occurred.	te, or tic nmental law?

Case 19-42048 Doc 1 Filed 07/08/19 Entered 07/08/19 15:15:07 Desc Main Document Page 100 of 118

ร 1	Brandon	Allen	Blaisdell	Case number (if known)	
	First Name Middle	Name Las	t Name		
•	and the desired and government	ornmontal unit c	of any release of hazardous m	aterial?	
		emmentar um C	of any release of mazardous in	atoriai.	
1	No Yes, Fill in the details.				
-	(G) I III III LIIO WOLLIIGI		Governmental unit	Environmental law, if you k	know it Date of notice
	Name of site		Governmental unit		: :
	radio or one				
	Number Street		Number Street		
			City State ZIP Co	de	
	City	State ZIP Code			
łav	e vou been a party in	any judicial or a	dministrative proceeding und	er any environmental law? Incl	ude settlements and orders.
Ø		,			
	Yes. Fill in the details				
			Court or agency	Nature of the case	Status of the case
	Case title				n
	Case title		Court Name	in the second se	Pending
					☐ On appea
			Number Street		Conclude
	Case number		City State	ZIP Code	
	out name.		City Citato	E. 6545	
rt 1		At and Vans D	usiness or Connections to	Any Rucinese	
⊠	 □ A sole proprietor □ A member of a lin □ A partner in a par □ An officer, director □ An owner of at lease No. None of the above 	or self-employed nited liability continership or, or managing ast 5% of the volve ase applies. Go to	d in a trade, profession, or oth mpany (LLC) or limited liability executive of a corporation ting or equity securities of a c	orporation h business. susiness Emplo	oart-time oyer identification number ot include Social Security number or ITIN.
	Dusiness Name			FIN:	<u>-</u>
	Number Street				
			Name of accountant or boo	kkeeper Dates	s business existed
				Fron	n To
	City	State ZIP Code	the second second		
			Describe the nature of the b		loyer Identification number ot Include Social Security number or ITIN.
	Business Name				
	D		_	EIN:	
	Number Street		Name of accountant or boo	kkeeper Dates	s business existed
			 :	_	
				Fron	m To
		Clate ZID Code			

Case 19-42048 Doc 1 Filed 07/08/19 Entered 07/08/19 15:15:07 Desc Main Document Page 101 of 118

r 1	Brandon	Allen	Blaisdell	Case number (if known)
	First Name Mi	ddie Name Last N	ame	
			Describe the nature of the business	Employer Identification number Do not include Social Security number or ITIN.
	Business Name	* - IA		EIN:
	Number Street		Name of accountant or bookkeeper	Dates business existed
				From To
	City	State ZIP Code		
		200		- 445 gruena shaut your business? Include all financial
	hin 2 years before y itutions, creditors,		tcy, did you give a financial stateme	nt to anyone about your business? Include all financial
		or other parties.		
	No Yes. Fill in the deta	ılls below.		
_	res. Fill in the dea	ma solow.	Date issued	
			Date issued	
	Name		MM / DD / YYYY	
	Number Street			
	0.11	State ZIP Code		
	City	State Zn Oode		
art :	23 Sign Below	,		
	i i i i i i i i i i i i i i i i i i i			
		ers on this Stateme	<i>nt of Financial Affair</i> s and any attach	ments, and I declare under penalty of perjury that the
l I a ir	Aug 4	d correct. I understa: bankruptcy case ca	nd that making a talse statement. Col	ncealing property, or obtaining money or property by Hadd nprisonment for up to 20 years, or both.
l I a ir	nswers are true and a connection with a B U.S.C. §§ 152, 134	d correct. I understa bankruptcy case ca 41, 1519, and 3571.	nd that making a talse statement. Col	ncealing property, or obtaining money or property by made
l I ai	nswers are true and a connection with a B U.S.C. §§ 152, 134	d correct. I understa bankruptcy case ca 41, 1519, and 3571.	nd that making a talse statement. Col	ncealing property, or obtaining money or property by made
l l ar ir	nswers are true and a connection with a B U.S.C. §§ 152, 134	d correct. I understall bankruptcy case case the day of	nd that making a talse statement. Col	ncesting property, or obtaining money or property by made
l I a ir	Signature of Debtor	d correct. I understal bankruptcy case cast, 1519, and 3571.	nd that making a talse statement. Col	Roul dell
ir ir 1:	Signature of Debtor	d correct. I understall bankruptcy case cast, 1519, and 3571. Slausell correct.	nd that making a false statement, colon result in fines up to \$250,000, or in Signature of Debtor	Roud dell
III aa irri 11 11 11 11 11 11 11 11 11 11 11 11 11	Signature of Debtor	d correct. I understall bankruptcy case cast, 1519, and 3571. Slausell correct.	nd that making a false statement, colon result in fines up to \$250,000, or in Signature of Debtor	Roul Dell
l l a a irr 1:	Signature of Debtor	d correct. I understall bankruptcy case cast, 1519, and 3571. Slausell correct.	nd that making a false statement, colon result in fines up to \$250,000, or in Signature of Debtor	Roud dell
l l a a irr 1:	Signature of Debtor	d correct. I understall bankruptcy case cast, 1519, and 3571. Slausell correct.	nd that making a false statement, colon result in fines up to \$250,000, or in Signature of Debtor	Roud Dell
III aa ir 11 11 11 11 11 11 11 11 11 11 11 11 11	Signature of Debtor Date 17-01-2 In No Yes	d correct. I understal bankruptcy case ca 41, 1519, and 3571. Sauding and 3571.	Statement of Financial Affairs for Inc.	nprisonment for up to 20 years, or both. Low Dell 2 ADIS dividuals Filing for Bankruptcy (Official Form 107)?
III aa irri 12 aa irri	Signature of Debtor Date 37 - 01 - 2 Did you attach addit No Yes	d correct. I understal bankruptcy case ca 41, 1519, and 3571. Sauding and 3571.	nd that making a false statement, colon result in fines up to \$250,000, or in Signature of Debtor	nprisonment for up to 20 years, or both. Low Dell 2 ADIS dividuals Filing for Bankruptcy (Official Form 107)?
III aa irr 11 aa	Signature of Debtor Date 07 - 01 - 2 id you attach addit No Yes No	d correct. I understal bankruptcy case ca 41, 1519, and 3571. Sauding and 3571.	Statement of Financial Affairs for Inc. Statement of an attorney to help you fill of	nprisonment for up to 20 years, or both. Low Dell 2 ADIS dividuals Filing for Bankruptcy (Official Form 107)?

Case 19-42048 Doc 1 Filed 07/08/19 Entered 07/08/19 15:15:07 Desc Main Page 102 of 118 Document

Fill in this in	formation to ide	ntify your case:	
Debtor 1	Brandon First Name	Allen Middle Name	Blaisdell Last Name
Debtor 2 (Spouse, if filing	Tonya First Name	Draughon Middle Name	Blaisdell Last Name
United States	Bankruptcy Court fo	or the: Western District of Mi	ichigan
Case number (If known)			

Official Form 108

1.

Statement of Intention for Individuals Filing Under Chapter 7

If you are an individual filing under chapter 7, you must fill out this form if:

- creditors have claims secured by your property, or
- you have leased personal property and the lease has not expired.

You must file this form with the court within 30 days after you file your bankruptcy petition or by the date set for the meeting of creditors, whichever is earlier, unless the court extends the time for cause. You must also send copies to the creditors and lessors you list on the form.

If two married people are filing together in a joint case, both are equally responsible for supplying correct information. Both debtors must sign and date the form.

Be as complete and accurate as possible. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known).

List Your Creditors Who Have Secured Claims

For any creditors that you listed in Part 1 of Schedule D: C information below.	reditors Who Have Claims Secured by Property (Offici	al Form 106D), fill in the
Identify the creditor and the property that is collateral	What do you intend to do with the property that secures a debt?	Did you claim the property as exempt on Schedule C?
Creditor's	☐ Surrender the property.	☐ No ☐ Yes
name:	Retain the property and redeem it.	☐ Yes
Description of property	Retain the property and enter into a Reaffirmation Agreement.	
securing debt:	Retain the property and [explain]:	-
Creditor's	☐ Surrender the property.	☐ No
name:	Retain the property and redeem it.	☐ Yes
Description of property	Retain the property and enter into a Reaffirmation Agreement.	
securing debt:	Retain the property and [explain]:	_
Creditor's	☐ Surrender the property.	□ No
name:	Retain the property and redeem it.	☐ Yes
Description of property	Retain the property and enter into a Reaffirmation Agreement.	
securing debt:	Retain the property and [explain]:	-
Creditor's	☐ Surrender the property.	☐ No
name:	Retain the property and redeem it.	☐ Yes
Description of property	Retain the property and enter into a Reaffirmation Agreement.	
securing debt:	Retain the property and [explain]:	-

12/15

Case 19-42048 Doc 1 Filed 07/08/19 Entered 07/08/19 15:15:07 Desc Main Document Page 103 of 118

Case number (If known)_

Blaisdell

Allen

Brandon

Debtor 1

First Name **List Your Unexpired Personal Property Leases** Part 2: For any unexpired personal property lease that you listed in Schedule G: Executory Contracts and Unexpired Leases (Official Form 106G), fill in the information below. Do not list real estate leases. Unexpired leases are leases that are still in effect; the lease period has not yet ended. You may assume an unexpired personal property lease if the trustee does not assume it. 11 U.S.C. § 365(p)(2). Will the lease be assumed? Describe your unexpired personal property leases ☐ No Lessor's name: Yes Description of leased property: ☐ No Lessor's name: Yes Description of leased property: ☐ No Lessor's name: Yes Description of leased property: ☐ No Lessor's name: ☐ Yes Description of leased property: ☐ No Lessor's name: ☐ Yes Description of leased property: ☐ No Lessor's name: ☐ Yes Description of leased property: ☐ No Lessor's name: Yes Description of leased property: Part 3: Sign Below Under penalty of perjury, I declare that I have indicated my intention about any property of my estate that ecures a debt and any personal property that is subject to an une pired Jone Black Signature of Debtor 2 Date 07 -01 - 2019 Date 07-01-2019

Entered 07/08/19 15:15:07 Desc Main Case 19-42048 Doc 1 Filed 07/08/19

Document Page 104 of 118

B 201B (Form 201B) (12/09)

UNITED STATES BANKRUPTCY COURT

District of Minnesota

n re <u>Brandon Allen Blaisdell</u> Debtor	Case No Chapter _ 7	
CERTIFICATION OF NOTICE UNDER § 342(b) OF TH	E TO CONSUMER DEBTOR(S E BANKRUPTCY CODE	S)
Certification of [Non-Attorney] I, the [non-attorney] bankruptcy petition preparer signing the attached notice, as required by § 342(b) of the Bankruptcy Code.	y] Bankruptcy Petition Preparer he debtor's petition, hereby certify that I del	ivered to the debtor the
	464-25-7787	
Printed name and title, if any, of Bankruptcy Petition Preparer Address: 2140 Maywood Drive Birmingham, Alabama 35214 X Signature of Bankruptcy Petition Preparer or officer, principal, responsible person, or partner whose Social Security number is provided above.	Social Security number (If the preparer is not an individual, s number of the officer, principartner of the bankruptcy petit by 11 U.S.C. § 110.)	atate the Social Security
Certificatio	n of the Debtor	10(h) of the Bankruntcy
I (We), the debtor(s), affirm that I (we) have received and	read the attached notice, as required by § 3-	+2(0) of the Bankrapie)
Code.	X Bender Heisell Signature of Debtor	07-01-2019 Date
Brandon Blaisdell and Tonya Blaisdell	Signature of Debtor	Date
Printed Name(s) of Debtor(s)	1 00 111	07-01-2010
Case No. (if known)	X Janus Bleustoll Signature of Joint Debtor (if any)	07-01-20 Kg
Instructions: Attach a copy of Form B 201A, Notice to Cor		

Instructions: Attach a copy of Form B 201A, Notice to Consumer Debtor(s) Under § 342(b)

Use this form to certify that the debtor has received the notice required by 11 U.S.C. § 342(b) only if the certification has NOT been made on the Voluntary Petition, Official Form B1. Exhibit B on page 2 of Form B1 contains a certification by the debtor's attorney that the attorney has given the notice to the debtor. The Declarations made by debtors and bankruptcy petition preparers on page 3 of Form B1 also include this certification.

Case 19-42048 Doc 1 Filed 07/08/19 Entered 07/08/19 15:15:07 Desc Main Document Page 105 of 118

n 1.1 1	Brandon	Allen	Blaisdell
Debtor 1	First Name	Middle Name	Last Name
Dahlar 2	Tonva	Draughon	Blaisdell
Debtor 2 (Spouse, if filing		Middle Name	Last Name
United States		or the: District of Minnesota	a

Check one box only as directed in this form and in Form 122A-1Supp:	
1. There is no presumption of abuse.	
2. The calculation to determine if a presumption of abuse applies will be made under Chapter 7 Means Test Calculation (Official Form 122A–2).	
3. The Means Test does not apply now because of qualified military service but it could apply later.	

☐ Check if this is an amended filing

Official Form 122A-1

Chapter 7 Statement of Your Current Monthly Income

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for being accurate. If more space is needed, attach a separate sheet to this form. Include the line number to which the additional information applies. On the top of any additional pages, write your name and case number (if known). If you believe that you are exempted from a presumption of abuse because you do not have primarily consumer debts or because of qualifying military service, complete and file Statement of Exemption from Presumption of Abuse Under § 707(b)(2) (Official Form 122A-1Supp) with this form.

Part 1: Calculate Your Current Monthly Income

V	Vhat is you	ir marital and filing status? Check one only.						
	☐ Not mai	rried. Fill out Column A, lines 2-11.	U. Outure A and D. linon 2.11					
Į	Married and your spouse is filing with you. Fill out both Columns A and B, lines 2-11.							
Į	Married and your spouse is NOT filing with you. You and your spouse are:							
	Living in the same household and are not legally separated. Fill out both Columns A and B, lines 2-11. Living separately or are legally separated. Fill out Column A, lines 2-11; do not fill out Column B. By checking this box, you declare Living separately or are legally separated. Fill out Column A, lines 2-11; do not fill out Column B. By checking this box, you declare the living separately or are legally separated. Fill out Column A, lines 2-11; do not fill out Column B. By checking this box, you declare							
	un	der penalty of perjury that you and your spouse ouse are living apart for reasons that do not inc	lude evading the Means Test requ	irements. 11 U.S.C	C. § 707(b)(7)(B).			
	bankruptcy August 31.	average monthly income that you received find y case. 11 U.S.C. § 101(10A). For example, if you fit the amount of your monthly income varied duesult. Do not include any income amount more that property in one column only. If you have	ring the 6 months, add the incom-	e for all 6 months a couses own the san	nd divide the total by 6. ne rental property, put the			
				Column A Debtor 1	Column B Debtor 2 or non-filing spouse			
2.	Your gross (before all	s wages, salary, tips, bonuses, overtime, an payroll deductions).	d commissions	\$ <u>1.609.7</u> 1	\$0.00			
	Column B i			\$0.00	\$0.00			
4.	of you or y	ts from any source which are regularly paid your dependents, including child support. In imarried partner, members of your household, y nates. Include regular contributions from a spot o not include payments you listed on line 3.	our dependents, parents,	\$ <u>0.0</u> 0	\$0.00			
5.	or farm Gross rece	ne from operating a business, profession,	Debtor 1 Debtor 2 \$ 0.00 \$ 0.00 - \$ 0.00 - \$ 0.00					
		and necessary operating expenses	- an Conv	e 0.00	s 0.00			
	Net month	ily income from a business, profession, or farm	\$_0.00 \$_0.00 copy	\$0.00	3			
6.	Gross rec	ne from rental and other real property eipts (before all deductions)	Debtor 1 Debtor 2 \$_0.00 \$_0.00 -\$ 0.00 -\$ 0.00					
		and necessary operating expenses	· · · · · · · · · · · · · · · · · · ·	s 0.00	s 0.00			
	Net month	nly income from rental or other real property	\$ 0.00 \$ 0.00 here	<u> </u>	\$ <u>0.00</u>			
7.	Interest,	dividends, and royalties		\$ <u>0.0</u> 0	Ψ			

Case 19-42048 Doc 1 Filed 07/08/19 Entered 07/08/19 15:15:07 Desc Main Document Page 106 of 118

ebtor 1 Bi	randon /	Allen Last Name	Blaisdell_	Case number (# known)		
				Column A Debtor 1	Column B Debtor 2 or non-filing spouse	
Unemploy	ment compensation			\$ 0.00	\$0.00	
Do not ente	er the amount if you conte	end that the amount re	ceived was a benefit			
	Social Security Act. Instea					
-	spouse		Ψ			
benefit und	r retirement income. Do ler the Social Security Ac	ot.		\$0.00	\$0.00	
Do not incli as a victim	ude any benefits received of a war crime, a crime a	d under the Social Sec against humanity, or in	iy the source and amount curity Act or payments red ternational or domestic age and put the total belo	eived		
				\$ <u>0.0</u> 0	\$0.00	
				\$0.00	\$0.00	
Total amo	ounts from separate page	es, if any.	•	+ \$ 0.00	+ \$ 0.00	
						<u> </u>
11. Calculate : column. Th	your total current mont nen add the total for Colu	thly income. Add lines imn A to the total for C	s 2 through 10 for each column B.	\$ <u>1,609.7</u> 1	\$ 0.00	\$ 1,609.71 Total current monthly income
	etermine Whether th		The second secon			
	your current monthly in					0 1 600 71
12a. Cop	y your total current montl	hly income from line 1	1	Co _l	py line 11 here 😙	\$ <u>1,609.71</u>
Mult	tiply by 12 (the number of	f months in a year).			poor	x 12
12b. The	result is your annual inco	ome for this part of the	form.		12b.	\$ <u>19,316.52</u>
13. Calculate	the median family inco	me that applies to yo	ou. Follow these steps:			
Fill in the s	state in which you live.		Minnesota			
	number of people in your		4			400.044.04
Fill in the r	median family income for	your state and size o	f household		13.	<u>\$109,211.0(</u>
To find a li instruction	ist of applicable median in is for this form. This list m	ncome amounts, go o nay also be available a	nline using the link specif at the bankruptcy clerk's o	ed in the separate ffice.		
14. How do th	he ilnes compare?					
	ine 12b is less than or ed So to Part 3.	qual to line 13. On the	top of page 1, check box	1, There is no presumption	n of abuse.	
	ine 12b is more than line So to Part 3 and fill out Fo		e 1, check box 2, The pre	sumption of abuse is dete	rmined by Form 122A	1-2.
	Bign Below					
Ву	y signing here, I declare ι	under penalty of perjui	y that the information on	this statement and in any a	attachments is true ar	nd correct.
y	& Andr Kl	and O		x Louge Ble	sdeel	
	Signature of Debtor 1			Signature of Debtor 2		
	Date 07-01-2016 MM/ DD /YYYY	<u>1</u>		Date 07 01 30(9	A
	If you checked line 14a		Form 122A-2.			
	•					
	Date 07-01 3016 MM / DD /YYYY If you checked line 14a] a, do NOT fill out or file	Form 122A–2. and file it with this form.		sollol	

Case 19-42048 Doc 1 Filed 07/08/19 Entered 07/08/19 15:15:07 Desc Main Document Page 107 of 118

Fill in this i	information to ider	ntify your case:	
Debtor 1 Debtor 2 (Spouse, if filin United State		Allen Middle Name Draughon Middle Name The: District of Minnesota	Blaisdell Last Name Blaisdell Last Name
Case numbe (If known)	er		

Check the appropriate box as directed in lines 40 or 42:	
According to the calculations required by this Statement:	
2. There is a presumption of abuse.	
☐ Check if this is an amended filing	

Official Form 122A-2

Chapter 7 Means Test Calculation

04/16

To fill out this form, you will need your completed copy of Chapter 7 Statement of Your Current Monthly Income (Official Form 122A-1).

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for being accurate. If more space is needed, attach a separate sheet to this form. Include the line number to which the additional information applies. On the top of any additional pages, write your name and case number (if known).

Part 1: Determine Your Adjusted Income	
Determine Your Adjusted Income 1. Copy your total current monthly income	
2. Did you fill out Column B in Part 1 of Form 122A-1?	
No. Fill in \$0 for the total on line 3.	
☑ Yes. Is your spouse filing with you?	
□ No. Go to line 3.	
Yes. Fill in \$0 for the total on line 3.	
 Adjust your current monthly income by subtracting any part of your household expenses of you or your dependents. Follow these steps: On line 11, Column B of Form 122A–1, was any amount of the income your regularly used for the household expenses of you or your dependents? No. Fill in 0 for the total on line 3. Yes. Fill in the information below: State each purpose for which the income was used 	ou reported for your spouse NOT Fill in the amount you
For example, the income is used to pay your spouse's tax debt or to support people other than you or your dependents	your spouse's income
	\$ <u> </u>
	\$
	+ \$
Total	\$
4. Adjust your current monthly income. Subtract the total on line 3 from	\$_1,609.71

Case 19-42048 Doc 1 Filed 07/08/19 Entered 07/08/19 15:15:07 Desc Main Document Page 108 of 118

Brandon Allen Case number (if known)_ Debtor 1 **Calculate Your Deductions from Your Income** Part 2: The Internal Revenue Service (IRS) issues National and Local Standards for certain expense amounts. Use these amounts to answer the questions in lines 6-15. To find the IRS standards, go online using the link specified in the separate instructions for this form. This information may also be available at the bankruptcy clerk's office. Deduct the expense amounts set out in lines 6-15 regardless of your actual expense. In later parts of the form, you will use some of your actual expenses if they are higher than the standards. Do not deduct any amounts that you subtracted from your spouse's income in line 3 and do not deduct any operating expenses that you subtracted from income in lines 5 and 6 of Form 122A-1. If your expenses differ from month to month, enter the average expense. Whenever this part of the form refers to you, it means both you and your spouse if Column B of Form 122A-1 is filled in. 5. The number of people used in determining your deductions from income Fill in the number of people who could be claimed as exemptions on your federal income tax return, plus the number of any additional dependents whom you support. This number may be different from the number of people in your household. You must use the IRS National Standards to answer the questions in lines 6-7. **National Standards** Food, clothing, and other items: Using the number of people you entered in line 5 and the IRS National Standards, fill s 1,694.00 in the dollar amount for food, clothing, and other items.

7. Out-of-pocket health care allowance: Using the number of people you entered in line 5 and the IRS National Standards, fill in the dollar amount for out-of-pocket health care. The number of people is split into two categories—people who are under 65 and people who are 65 or older—because older people have a higher IRS allowance for health care costs. If your actual expenses are higher than this IRS amount, you may deduct the additional amount on line 22.

People who are under 65 years of age

Out-of-pocket health care allowance per person 52.00 Number of people who are under 65 208.00 Copy here Subtotal. Multiply line 7a by line 7b. People who are 65 years of age or older 7d. Out-of-pocket health care allowance per person 0.00 Number of people who are 65 or older 0 0.00 Copy here Subtotal. Multiply line 7d by line 7e. 0.00 208.00 Conv total here 7g. Total. Add lines 7c and 7f..... 208.00 Case 19-42048 Doc 1 Filed 07/08/19 Entered 07/08/19 15:15:07 Desc Main Document Page 109 of 118

Debtor 1	Brandon First Name	Allen Middle Name Last Name	Blaisde	Case number (# known)
Local	Standards	You must use the IRS Local S	Standards to answer the qu	uestions in lines 8-15.
Basec bankr	l on informatic	n from the IRS, the U.S. Trus s into two parts:	tee Program has divided t	the IRS Local Standard for housing for
■ Ho	using and utili	ties – Insurance and operatin ties – Mortgage or rent exper	g expenses ises	
		tions in lines 8-9, use the U.S		
To find This c	d the chart, go o hart may also b	online using the link specified in e available at the bankruptcy c	the separate instructions for lerk's office.	for this form.
8. Ho do	ousing and util llar amount liste	ities – Insurance and operation of the contract of the contrac	ng expenses: Using the nu and operating expenses.	umber of people you entered in line 5, fill in the
9. H c	ousing and uti	ities – Mortgage or rent expe	nses:	
98	a. Using the nun for your count	nber of people you entered in li y for mortgage or rent expense	ne 5, fill in the dollar amoun	nt listed \$1,339.00
9t	o. Total average	monthly payment for all mortga	ages and other debts secure	red by your home.
	contractually	he total average monthly paym due to each secured creditor in hen divide by 60.	ent, add all amounts that ar the 60 months after you file	ire ie for
	Name of the	creditor	Average paymen	e monthly nt
			\$	0.00
			\$	
			+ c	
		Total average month	nly payment \$	0,00 Copy —\$ 0.00 Repeat this amount on line 33a.
), 9 (Culturant lin	ge or rent expense. e 9b (<i>total average monthly pa</i>) re). If this amount is less than \$	vment) from line 9a (mortga 0, enter \$0	age or \$\frac{1,339.00}{here}\$\$ \$\frac{1,339.00}{here}\$\$
10. lf	f you claim tha he calculation	t the U.S. Trustee Program's of your monthly expenses, fi	division of the IRS Local : Il in any additional amoun	Standard for housing is incorrect and affects \$0.00 nt you claim.
	Explain why:			
_	ocal transport		mber of vehicles for which y	you claim an ownership or operating expense.
_	1. Go to lin 2 or more.	e 12. Go to line 12.		
12.	Vehicle operation	on expense: Using the IRS Lo ses, fill in the Operating Costs	cal Standards and the num that apply for your Census	mber of vehicles for which you claim the region or metropolitan statistical area. \$ 368.00

Case 19-42048 Doc 1 Filed 07/08/19 Entered 07/08/19 15:15:07 Desc Main Document Page 110 of 118

Allen Blaisde Brandon Case number (if known) Debtor 1 First Name Middle Name 13. Vehicle ownership or lease expense: Using the IRS Local Standards, calculate the net ownership or lease expense for each vehicle below. You may not claim the expense if you do not make any loan or lease payments on the vehicle. In addition, you may not claim the expense for more than two vehicles. 2007 Chrysler Pacifica Describe Vehicle 1: Vehicle 1 497.00 Ownership or leasing costs using IRS Local Standard. Average monthly payment for all debts secured by Vehicle 1. Do not include costs for leased vehicles. To calculate the average monthly payment here and on line 13e, add all amounts that are contractually due to each secured creditor in the 60 months after you filed for bankruptcy. Then divide by 60. Average monthly Name of each creditor for Vehicle 1 payment 0.00 Repeat this Сору 0.00 0.00 amount on Total average monthly payment here 👈 line 33b. Copy net Vehicle 1 13c. Net Vehicle 1 ownership or lease expense 497.00 expense Subtract line 13b from line 13a. If this amount is less than \$0, enter \$0. 497.00 here.... 2006 Ford Super duty Truck Describe Vehicle 2: Vehicle 2 497.00 13d. Ownership or leasing costs using IRS Local Standard. 13e. Average monthly payment for all debts secured by Vehicle 2. Do not include costs for leased vehicles. Name of each creditor for Vehicle 2 Average monthly payment Repeat this Copy 0 amount on Total average monthly payment line 33c. Copy net 13f. Net Vehicle 2 ownership or lease expense Vehicle 2 497.00 expense Subtract line 13e from 13d. If this amount is less than \$0, enter \$0... 497.00 here ... 🛨 14. Public transportation expense: If you claimed 0 vehicles in line 11, using the IRS Local Standards, fill in the 0.00 Public Transportation expense allowance regardless of whether you use public transportation. 15. Additional public transportation expense: If you claimed 1 or more vehicles in line 11 and if you claim that you may also deduct a public transportation expense, you may fill in what you believe is the appropriate expense, but you may not claim 0.00 more than the IRS Local Standard for Public Transportation.

Case 19-42048 Doc 1 Filed 07/08/19 Entered 07/08/19 15:15:07 Desc Main Document Page 111 of 118

Allen_ Blaisde Case number (if known). Brandon Debtor 1 Last Name Middle Name In addition to the expense deductions listed above, you are allowed your monthly expenses for **Other Necessary Expenses** the following IRS categories. 16. Taxes: The total monthly amount that you will actually owe for federal, state and local taxes, such as income taxes, selfemployment taxes, Social Security taxes, and Medicare taxes. You may include the monthly amount withheld from your 0.00 pay for these taxes. However, if you expect to receive a tax refund, you must divide the expected refund by 12 and subtract that number from the total monthly amount that is withheld to pay for taxes. Do not include real estate, sales, or use taxes. 17. Involuntary deductions: The total monthly payroll deductions that your job requires, such as retirement contributions, union dues, and uniform costs. 0.00 Do not include amounts that are not required by your job, such as voluntary 401(k) contributions or payroll savings. 18. Life insurance: The total monthly premiums that you pay for your own term life insurance. If two married people are filing together, include payments that you make for your spouse's term life insurance. Do not include premiums for life insurance on your dependents, for a non-filing spouse's life insurance, or for any form of life insurance other than term. 0.00 19. Court-ordered payments: The total monthly amount that you pay as required by the order of a court or administrative agency, such as spousal or child support payments. \$ 740.00 Do not include payments on past due obligations for spousal or child support. You will list these obligations in line 35. 20. Education: The total monthly amount that you pay for education that is either required: as a condition for your job, or 0.00 for your physically or mentally challenged dependent child if no public education is available for similar services. 21. Childcare: The total monthly amount that you pay for childcare, such as babysitting, daycare, nursery, and preschool. 0.00 Do not include payments for any elementary or secondary school education. 22. Additional health care expenses, excluding insurance costs: The monthly amount that you pay for health care that is required for the health and welfare of you or your dependents and that is not reimbursed by insurance or paid by a health savings account. Include only the amount that is more than the total entered in line 7. 0.00 Payments for health insurance or health savings accounts should be listed only in line 25. 23. Optional telephones and telephone services: The total monthly amount that you pay for telecommunication services for you and your dependents, such as pagers, call waiting, caller identification, special long distance, or business cell phone service, to the extent necessary for your health and welfare or that of your dependents or for the production of income, if it 0.00 is not reimbursed by your employer. Do not include payments for basic home telephone, internet and cell phone service. Do not include self-employment expenses, such as those reported on line 5 of Official Form 122A-1, or any amount you previously deducted. \$ 6,682.00 24. Add all of the expenses allowed under the IRS expense allowances. Add lines 6 through 23.

Case 19-42048 Doc 1 Filed 07/08/19 Entered 07/08/19 15:15:07 Desc Main Page 112 of 118 Document

Case number (# known)_

Blaisde

Allen

Brandon

Debtor 1	Brandon First Name Middle Name	Allen Last Nam	Blaisde e	Case number (# known)	
Add	litional Expense Deductions	These are	additional deductions allowed by to tinclude any expense allowance	ihe Means Test. s listed in lines 6-24.	
i	Health insurance, disability in insurance, disability insurance, dependents.	surance, and and health sav	health savings account expensings accounts that are reasonably	ses. The monthly expenses for health y necessary for yourself, your spouse, or your	
	Health insurance		\$ 0.00		
	Disability insurance		\$ 0.00		
	Health savings account		+ \$ 0.00		
	Total		\$0.00_	Copy total here→	\$0.00
	Do you actually spend this total	amount?	an access con control which the fill the state of the sta	encryworkennound	
	☐ No. How much do you actua☐ Yes		\$0.00_		
26.	continue to pay for the reasona	ble and neces	sary care and support of an elder	e actual monthly expenses that you will ly, chronically ill, or disabled member of uch expenses. These expenses may 529A(b).	\$0.0
27.	Protection against family viol of you and your family under the	ence. The rea e Family Viole	sonably necessary monthly expendence Prevention and Services Act	nses that you incur to maintain the safety or other federal laws that apply.	\$0.0
	By law, the court must keep the	nature of the	se expenses confidential.		
28.	Additional home energy cost	s. Your home	energy costs are included in your	insurance and operating expenses on line 8.	
		ne energy cos	sts that are more than the home en	nergy costs included in expenses on line	\$ 0.0
		e documentati		ou must show that the additional amount	
29.	per child) that you pay for your elementary or secondary school	dependent chi ol.	ildren who are younger than 18 ye	e monthly expenses (not more than \$160.42* ears old to attend a private or public	\$ <u> 0</u> .0
	You must give your case truste reasonable and necessary and	e documentat	ion of your actual expenses, and y	you must explain why the amount claimed is	
				un on or after the date of adjustment.	
30.	Additional food and clothing higher than the combined food 5% of the food and clothing alle	and clothing a	allowances in the IRS National Sta	ctual food and clothing expenses are andards. That amount cannot be more than	\$0.0
		ximum additio	nal allowance, go online using the	e link specified in the separate instructions for	
	You must show that the addition	nal amount cl	almed is reasonable and necessa	ry.	
31.	Continuing charitable contrib instruments to a religious or ch	outions. The a aritable organ	amount that you will continue to co ization. 26 U.S.C. § 170(c)(1)-(2).	ontribute in the form of cash or financial	+ \$0.0
32.	. Add all of the additional exp	ense deductio	ons.		\$0.

Case 19-42048 Doc 1 Filed 07/08/19 Entered 07/08/19 15:15:07 Desc Main Document Page 113 of 118

Blaisde Allen Case number (if known) Brandon Debtor 1 **Deductions for Debt Payment** 33. For debts that are secured by an interest in property that you own, including home mortgages, vehicle loans, and other secured debt, fill in lines 33a through 33e. To calculate the total average monthly payment, add all amounts that are contractually due to each secured creditor in the 60 months after you file for bankruptcy. Then divide by 60. Average monthly payment Mortgages on your home: 0.00 33a. Copy line 9b here Loans on your first two vehicles: 0.00 33b. Copy line 13b here. 0 33c. Copy line 13e here. 33d. List other secured debts: Name of each creditor for other Identify property that Does payment secures the debt include taxes secured debt or Insurance? ☐ No Yes No Yes No Yes Copy total 0.00 0.00 33e. Total average monthly payment. Add lines 33a through 33d..... here 34. Are any debts that you listed in line 33 secured by your primary residence, a vehicle, or other property necessary for your support or the support of your dependents? No. Go to line 35. ☐ Yes. State any amount that you must pay to a creditor, in addition to the payments listed in line 33, to keep possession of your property (called the cure amount). Next, divide by 60 and fill in the information below. Monthly cure Total cure Name of the creditor Identify property that amount secures the debt amount $\div 60 =$ ÷ 60 = Copy total Total here 🕏 35. Do you owe any priority claims such as a priority tax, child support, or alimony that are past due as of the filing date of your bankruptcy case? 11 U.S.C. § 507. ☑ No. Go to line 36. Yes. Fill in the total amount of all of these priority claims. Do not include current or ongoing priority claims, such as those you listed in line 19.

 \div 60 =

Total amount of all past-due priority claims

Case 19-42048 Doc 1 Filed 07/08/19 Entered 07/08/19 15:15:07 Desc Main Document Page 114 of 118

Debtor 1	Brandon First Name Middle I	Allen Name Last Name	Blaisde	Case number (if known)	
Fo	or more information, go	a case under Chapter 13 o online using the link for B . Bankruptcy Basics may a	ankruptcy Basics spec	ified in the separate bankruptcy clerk's office		
_	No. Go to line 37.					CALL COLUMN AND AND AND AND AND AND AND AND AND AN
	Yes. Fill in the following	ng information.				
	Projected month	nly plan payment if you wer	e filing under Chapter	13 \$.		
	Administrative C	er for your district as stated Office of the United States (or by the Executive Office	Courts (for districts in A	labama and		
	link specified in	district multipliers that incluthe separate instructions for bankruptcy clerk's office.			geographic and the control of the co	
	Average monthl	y administrative expense if	you were filing under	Chapter 13 \$	Copy total here	\$
37. Ad d Add	d all of the deduction d lines 33e through 36.	s for debt payment.				\$0.00
Total D	Deductions from Inco	me				
38. Ad d	d all of the allowed de	eductions.				and any order control of the control
		nenses allowed under IRS	<u>\$ 6,68</u>	32.00		lary control of State
Cop	y line 32, All of the add	ditional expense deductions	s \$	0.00		And a series of the series of
Cop	y line 37, All of the dec	ductions for debt payment	+\$	0.00		STATE AND ADDRESS OF THE STATE AND ADDRESS OF THE STATE ADDRESS OF THE S
		Total deduc	tions \$ 6,68	32.00 Copy tota	al here→	\$ <u>6,68</u> 2.00
Part 3	Determine Wh	ether There Is a Pres	umption of Abuse			Control of the Contro
39. Cal	culate monthly dispo	osable income for 60 mor	iths			in control of the con
39a	a. Copy line 4, adjuste	ed current monthly income	Ψ	9.71		And the state of t
39b	o. Copy line 38, Total	deductions	- _{\$6,68}	32.00		Vo. Legis Andreas
39 c	c. Monthly disposable Subtract line 39b fro	income. 11 U.S.C. § 707(lom line 39a.	o)(2). \$5,07	2.29 Copy here→	\$5,072.29	
	For the next 60 mg	onths (5 years)	200000000000000000000000000000000000000		x 60	Down in collection of the coll
390	d. Total. Multiply line	39c by 60			\$-304,337.40 Copy	s-304,337.40
40. Fin	nd out whether there i	is a presumption of abus	e. Check the box that a	applies:		TOTAL ADDRESS AND ADDRESS AND ADDRESS
4	The line 39d is less to Part 5.	than \$7,700*. On the top o	f page 1 of this form, c	heck box 1, There is no	presumption of abuse. Go	
Q	The line 39d is more may fill out Part 4 if yo	than \$12,850*. On the top ou claim special circumstar	of page 1 of this form ices. Then go to Part 5	, check box 2, <i>There is a</i> i.	a presumption of abuse. You	-
	The line 39d is at lea	st \$7,700*, but not more	than \$12,850*. Go to l	ine 41.		et produce and the control of the co
	* Subject to adjustme					

Case 19-42048 Doc 1 Filed 07/08/19 Entered 07/08/19 15:15:07 Desc Main Document Page 115 of 118

Debtor 1	Brandon	Allen	Blaisde	Case number (#	knoum)		
	First Name	Mikkile Name Last Name			<i></i>		
41. 41a	Summary of Y	ount of your total nonpriority our Assets and Liabilities and C 106Sum), you may refer to line	Certain Statistical Informat	ion Schedules			
					»x .25	-	
411		total nonpriority unsecured do			\$	Copy here	\$
42. Dete is ei	ermine whether nough to pay 2	the income you have left ove 5% of your unsecured, nonpri	r after subtracting all aliority debt.	lowed deductions			
	eck the box that a		•				
	Line 39d is less Go to Part 5.	than line 41b. On the top of pa	age 1 of this form, check l	oox 1, There is no presu	ımption of abuse.		
1	Line 39d is equ of abuse. You m	al to or more than line 41b. Or ay fill out Part 4 if you claim spe	n the top of page 1 of this ocial circumstances. Then	form, check box 2, The go to Part 5.	re is a presumptio	n	
Part 4:	Give Details	s About Special Circumsta	ances				
3. Do you	have any speci	al circumstances that justify	additional expenses or a	adjustments of current	t monthly income	for which th	iere is no
reasona	able alternative	? 11 U.S.C. § 707(b)(2)(B).			•		
	Go to Part 5.						
₩ Yes.	for each item.	ing information. All figures shou ou may include expenses you	Id reflect your average material in line 25.	onthly expense or incon	ne adjustment		
	adjustments ne	a detailed explanation of the specessary and reasonable. You mome adjustments.	ecial circumstances that nust also give your case tr	nake the expenses or in ustee documentation of	come your actual		
	Give a detailed	explanation of the special circum	stances		Average monthl or income adjus		
	And the second s	and the state of t		- The state of the	\$		
	Photo and the second se			DATA Announce suppose suppose on a propose in participation of the suppose of the	\$		
	-				\$		
					\$		
					Φ		
art 5:	Sign Below						
ı	By signing here,	I declare under penalty of perju	ıry that the information on	this statement and in a	ny attachments is	true and corre	ect.
	* Brown! Signature of D	n Glusdel	×	Jornete Blow	selel		
	•			olynature of Deptor 2			
	Date O7-0 MM / DD	71-7019 14444		Date 07-01-201	5		

CREDIT MATRIX

Minnesota Unemployment Insurance Post Office Box 64653 ST. Paul , MN.55164

Texas Atty. Gen. Child Support Div. 300 West 15th St Austin, TX. 78701

AAFES/Military Star 3911 S. Walton Walker Blvd Dallas,TX 75236

Acceptance Now 5501 Headquarter Drive Plano, TX 75024

Bull City Financial Solution 2609 N. Duke St. STE. 500 Durham, NC 27704

Coastal Credit LLC 10333 N. Meridian St. Ste.400 Indianapolis, IN. 46290

FSNB NA Post Office Box 33009 Ft. Sill, OK. 73503

U.S. Department of Education 61 Forsyth ST. SW 19T40 Atlanta, GA.30303

U.S. Dept. of ED/Glesi Post Office Box 7860 Madison WI. 53707

U.S. Dept. of Education Post Office Box 5609 Greenville, TX. 75403

American Account Advisor, Inc 7460 80th St. Cottage Grove, MN.55016 Metropolitan Anesthesia Network Post Office Box 47159 Plymouth, MN.55447

Consulting Radiologist 7505 Metro Blvd Suite 400 Edina, MN.55439

Frontier Communications Post Office Box 5157 Tampa, FL 33675

Central Carolina Community College 1105 Kelly Drive Sanford, NC. 27330

Complete payment Recovery Services Post Office Box 30184 Tampa, FL. 33630

Fayetteville State University 1200 Murchison Rd Fayetteville, NC. 28301

AAFES/ Military Star 55 Second Street Suite 300 San Franciso, CA. 94105

Mid Florida Finance LLC 1200 W. Memorial Blvd Lakeland, FL.33815

Monterey Collection Services 4095 Avenida DE LA Plata Oceanside, CA.92056

Pioneer/PSSF inc 3240 E. Tropicana Las Vegas, NV 89121

Verizon Wireless Post Office Box 650051 Dallas,TX. 75265 Webbank/Fingerhut 6250 Ridgewood Rd. ST. Cloud, MN. 56303

Army/Air Force Exchange Post Office Box 650410 Dallas, TX. 75265

Security Credit services 306 Enterprise Drive Oxford, MS. 38658

CBCS [AER Loan] Post Office Box 2589 Columbus, OH.43216

Matt's Sanitation Post Office Box 368 Hinkley, MN.55037

US Cellular 8410 West Bryn Mawr Avenue Suite 700 Chicago, IL. 60631

AMS American Municipal Services city of Kountze Post Office Box 118312 Carrolton, TX 75011

Hunter Warfield 4620 Woodland Corporate Blvd Tampa ,FL. 33614

Bank of America Post Office Box 790087 St. Louis, MO. 63179